9 Appendices

This section contains supplementary information referenced in the main body of the report. It has four subsections:

Business Process Flows – This section contains definitions for the business process flow figures used in the process flows. Current staff roles and responsibilities are also identified in this section as they relate to the process flows.

FSMB Products and Services – This section contains supplemental information and observations on the FSMB products and services described in Section 5.1, starting on page 90.

Recommendations – Additional Information – This section includes a further description of the recommendations in Section 6 - Recommendations, starting on page 99. Supporting detail and information is provided to facilitate recommendation evaluation by MBC Licensing Program staff.

Sample Forms and Web Pages – This section has current and proposed forms and web pages identified throughout the report.
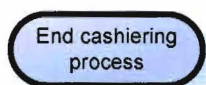
9.1 Business Process Flows

9.1.1   Business Process Flow Figures

The Business Process Flows (flowcharts) created for this BPR Study are comprised of several basic figures:

Terminator: This shape tells you where the flowchart ends.

End cashiering process

Rectangle: The rectangle is the most common shape. It is used to show a process, task, action, or operation. It shows something that has to be done or an action that has to be taken. The double lined rectangle represents a predefined process, meaning the process is documented in a policy and procedure. The single line rectangle represents a process conducted, but not necessarily documented.

0920	1120
Deliver to reviewer 'In' basket	Update ATS record
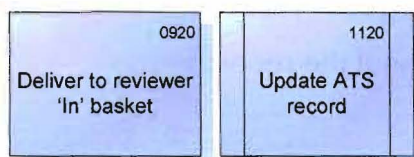
Decision: A decision asks a question. The answer to the question determines which arrow you follow out of the decision shape. The arrows flowing from the decision shape are labeled Yes or No.


0860
New application?

Off Page Connector: This shape means the flow refers to a process flow on another page. Letters in the shape refer you to the appropriate flowchart.

AR

Document: A rectangle with a curved bottom represents a document or report.

0820
Deficiency letter to applicant
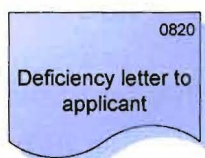
Delay: The Delay shape represents a waiting period where no activity is done. Delays should be analyzed to see if they can be minimized or eliminated.

1520
Wait for requested documents to be received
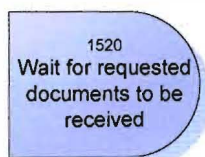
Input : A parallelogram is used to show input. Examples of input are receiving a report, getting mail, getting an application, etc.

1100
'To Be Reviewed' basket (new applications)
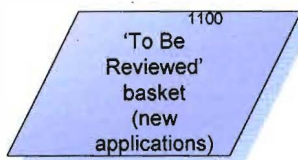
The Data Dictionary is used in conjunction with the process flows to provide information in another format or information not captured in the process flows such as:

- Identifier – a unique four-digit number to
- Category and Subcategory - for further identification and grouping
- Description – of
- What group/role performs this function
- Additional Information

Both the Data Dictionary and the process flows are considered "living documents". These documents will need to be maintained and refined through an iterative process of review and updates to remain an effective tool for the Licensing Program Staff.

The Data Dictionary will be provided to MBC under separate cover.

The process flows were developed in Visio based on an agreement with MBC Licensing Staff and MBC Information Systems Branch (ISB). The Data Dictionary was developed in MS-Word. Both the process flows and Data Dictionary were compiled from information gathered through existing documentation made available to the BPR Study Team and interviews with MBC staff. The Process Flows were verified by MBC Staff unless otherwise noted.

9.1.2   Mailroom Business Process
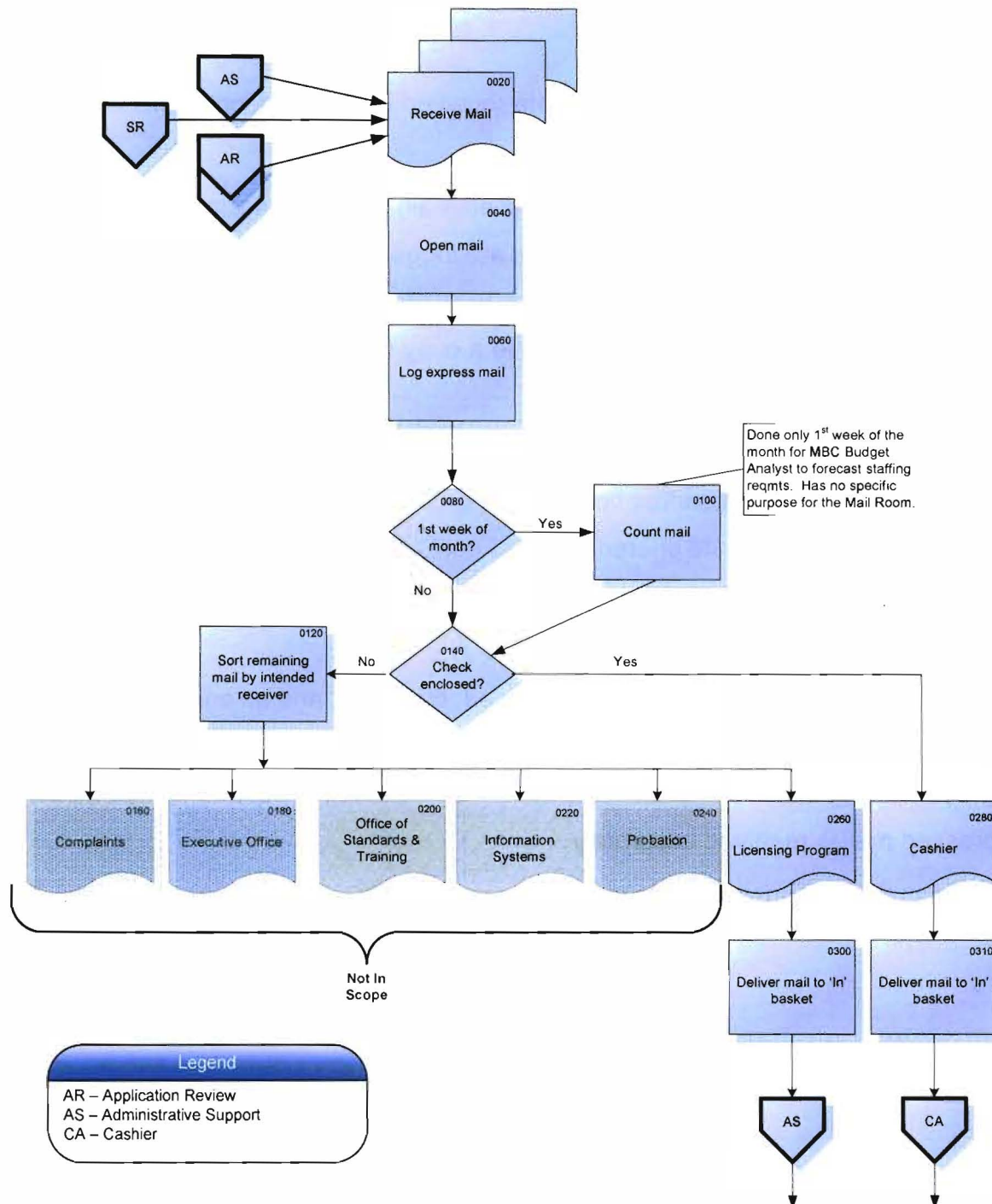
The Mailroom Clerk:

- Opens and date stamps mail with the date received in the mailroom. This is done on each business day.

- Logs Express mail (e.g., FedEx, DHL, certified mail) with the tracking number issued by the delivery service. Tracking numbers are logged in an MS Excel spreadsheet by carrier name, along with a count of the pieces of mail received by that carrier, and the intended receiver. Each unit will receive a copy of the Express Mail log sheet along with their daily mail.

- Counts all USPS general mail the first week of each month. This is done for the MBC Budget Analyst and serves no specific purpose for the mailroom itself. These counts are used to compute shared services costs (money reimbursed to the Board by certain affiliated healing arts programs for services rendered by Medical Board staff).

- Sorts mail by MBC unit. If a check is enclosed, the check and all enclosures are forwarded to the Cashier for processing. Each unit will receive a copy of the Express Mail log sheet along with their daily mail. The log is used to verify that the expressed mail is received accurately.

- Delivers mail each business day to the appropriate MBC unit by early afternoon.

Figure 18 - Business Services – Mail Room Process Flow (MR)

0020 Receive Mail

0040 Open mail

0060 Log express mail

0080 1st week of month?

Yes → **0100** Count mail

Done only 1st week of the month for MBC Budget Analyst to forecast staffing reqmts. Has no specific purpose for the Mail Room.

No

0120 Sort remaining mail by intended receiver ← No — **0140** Check enclosed? — Yes →

0160 Complaints

0180 Executive Office

0200 Office of Standards & Training

0220 Information Systems

0240 Probation

0260 Licensing Program

0280 Cashier

Not In Scope

0300 Deliver mail to 'In' basket

0310 Deliver mail to 'In' basket

AS

CA

SR, AS, AR

Legend
AR – Application Review
AS – Administrative Support
CA – Cashier

9.1.3   Cashiering Business Process

The Cashiering Staff sorts and processes four general types of mail in which money is included:

New application with a check included – an ATS record is created for the new applicant using the applicant's name, date of birth, social security number, and the payment amount. The check will be tendered and the application forwarded to the Administrative Support Staff Inbox for processing.

Check with no documents – a copy of the check is made on 'hot pink' paper and forwarded to the Administrative Support Staff Inbox for the Review Staff to research. The original check will be held at the Cashier's until Review Staff responds with a 'blue' fee invoice filled out defining how to apply the received fees and to which ATS record. The instructions may also direct the cashiering staff to return the check to the sender because an ATS record could not be found. The Cashier requests that Review Staff return the completed 'blue' fee invoice within five (5) days, in order to comply with the State Administrative Manual (SAM) guidelines for undeposited receipts[23]. Once staff knows how to apply the check amount, the ATS record will be updated.

Fee invoices with check– applies the payment amount to the corresponding ATS record. The check is tendered and the 'blue' fee invoice is forwarded to Licensing for distribution to the appropriate staff.

License renewal invoices with check– fees received are recorded in ATS and then the Consumer Affairs System (CAS) record is updated to reflect payment of fees. The check will be tendered and the renewal invoice questionnaire will be scanned into CAS.

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[23]   The State Administrative Manual (SAM), Chapter 8000, §8032.1 states: "Accumulated receipts of any amount will not remain undeposited for more than ten working days".

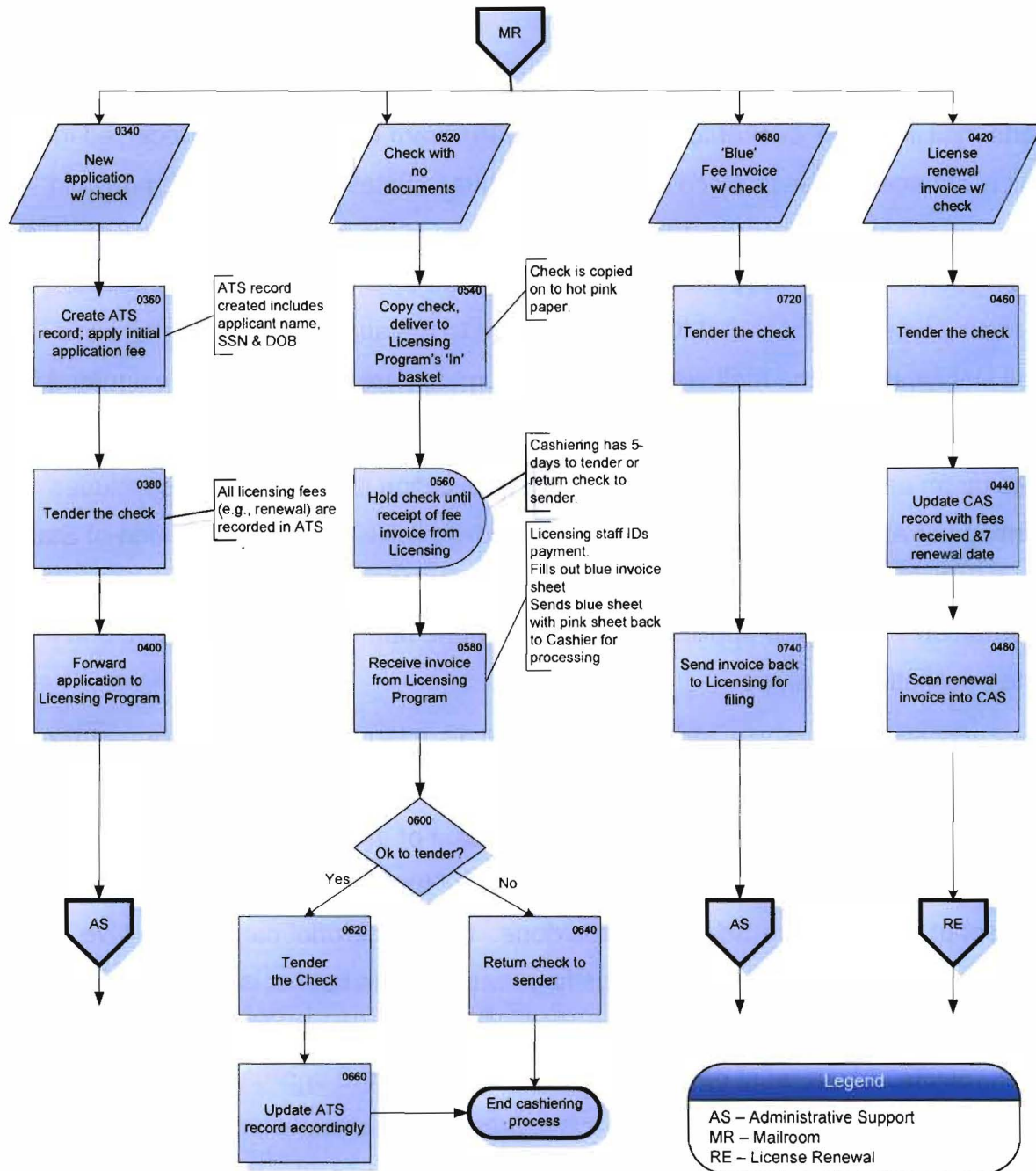## Figure 19 - Licensing Program – Cashiering Process Flow (CA)

MR

0340 New application w/ check

0360 Create ATS record; apply initial application fee
— ATS record created includes applicant name, SSN & DOB

0380 Tender the check
— All licensing fees (e.g., renewal) are recorded in ATS

0400 Forward application to Licensing Program

AS

0520 Check with no documents

0540 Copy check, deliver to Licensing Program's 'In' basket
— Check is copied on to hot pink paper.

0560 Hold check until receipt of fee invoice from Licensing
— Cashiering has 5-days to tender or return check to sender.
— Licensing staff IDs payment. Fills out blue invoice sheet. Sends blue sheet with pink sheet back to Cashier for processing

0580 Receive invoice from Licensing Program

0600 Ok to tender?
Yes / No

0620 Tender the Check

0640 Return check to sender

0660 Update ATS record accordingly

End cashiering process

0680 'Blue' Fee Invoice w/ check

0720 Tender the check

0740 Send invoice back to Licensing for filing

AS

0420 License renewal invoice w/ check

0460 Tender the check

0440 Update CAS record with fees received &7 renewal date

0480 Scan renewal invoice into CAS

RE

Legend
AS – Administrative Support
MR – Mailroom
RE – License Renewal

9.1.4   Administrative Support Business Process

Administrative Support Business Process Overview

The Administrative Support Staff:

- Sorts mail in the 'In' basket for the Licensing Program Unit. The date received in the Unit is stamped on each piece of mail. This date initiates the 60- working days in which an initial review of the application must take place and applicant notified of the application status[24]. Supporting documentation for applications is alphabetized, sorted by type (US/CAN or IMG) and delivered to the appropriate staff member's mail slot located in the mail area. These documents are picked up by designated Z-project Staff who will update the ATS record.

- Sets up an applicant file folder when a new application is received. This includes printing the American Medical Association (AMA) profile and the Federation of State Medical Boards (FSMB) check. The ATS record is updated with demographic information such as the applicant's address, phone number, email address, and the date application received.

- Conducts a cursory review of the application (L1A-L1E) for completeness (notary, all boxes filled in). If the application is incorrectly filled out, staff generates an application deficiency letter to advise the applicant of the errors and requests a new application be completed. In addition to review of the application, a check for fingerprint cards or Live Scan receipt is done. If no fingerprint cards or no Live Scan receipt is enclosed, the miscellaneous fingerprints cards basket is checked and the Live Scan folder is checked for Live Scan results. If unable to locate cards or Live Scan results, a fingerprint deficiency letter is mailed to the applicant. If fingerprint cards are enclosed or located in the miscellaneous fingerprints basket, then one card is attached to the application file, the other is placed in the basket for fingerprint

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[24] CCR Title 16, § 1319.4

cards waiting to be processed. If Live Scan results are found, they are included in the application file.

- Determines licensing pathway based on information provided on the application L1A or L1B forms and enters pathway on ATS record. The licensing pathway is used to specify the California statute the applicant is applying for licensure under. Within the statute, requirements for licensure are identified (such as postgraduate training and exam scores). For example B&P § 2170 identifies the requirements for licensure for US/CAN Medical School Graduates.

- Generates letter acknowledging application receipt.

- Generates Web Payment letter informing applicant they have 30 days to submit an application or fees will be refunded when fees are received but there is no application. The letter is sent if no application is received two weeks after receipt of payment.

- Generates a deficiency letter and sends it to the applicant if application is received, but there is no record of fees received. If no fees are received within 30 days, the application is destroyed and any original copies of documents (e.g., diploma) are returned by certified mail to the applicant.

The Z-project Staff:

- Receives new application files from Administrative Support Staff. The application and any supporting documentation (i.e., transcripts, diplomas) are recorded in ATS with a 'Z' identifier. This identifier indicates that the documents have been received but not yet reviewed.

- Retrieves loose application documents (i.e., L2 – L6) that have been placed in the appropriate reviewer's mail slot located in the mail area. These documents are recorded in ATS by updating the Application Requirements Status Field with a 'Z'.

- Delivers new application files and loose application documents to the appropriate reviewer's 'In' basket.

Figure 20 - Licensing Program – Administrative Support Process Flow (AS)
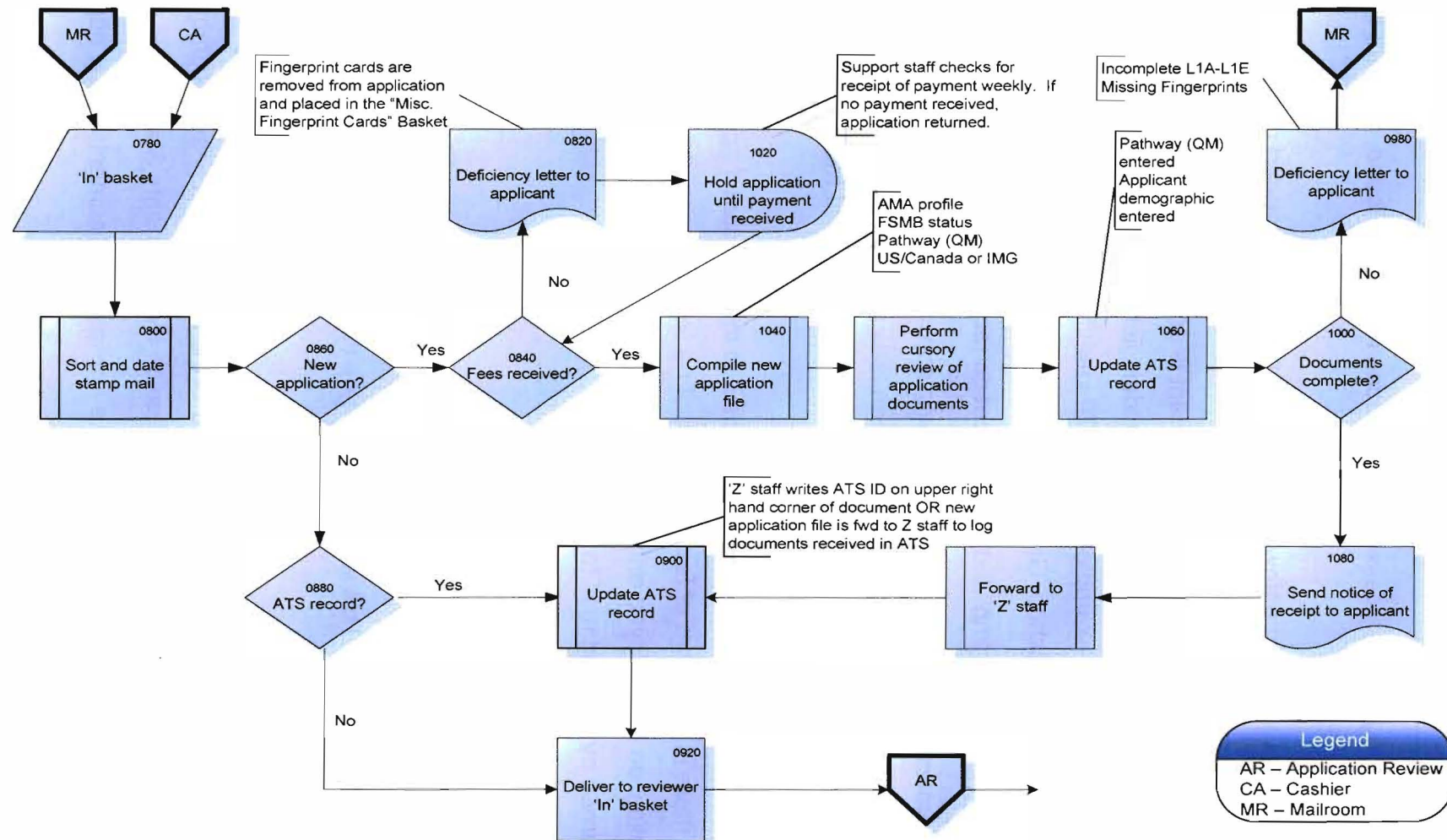
9.1.5   Application Review Business Process

Application Review Business Process Overview

The Application Reviewer:

- Conducts initial file reviews. During this review multiple documents are assessed for completeness and accuracy. The ATS record is updated accordingly.

- Generates and sends letters to applicants noting all missing or incomplete documents. Application is filed in the 'pending review' file drawer until receipt of requested document(s).

- Processes documents delivered to 'In' baskets daily. Incoming application documents are reviewed and filed in the appropriate application file. The ATS record is updated. If the document is not acceptable or incomplete, a new document is requested in writing. If an ATS record is not found, the document is filed in the 'Miscellaneous Mail' basket. Miscellaneous mail is checked regularly as new applications arrive.

- Initiates Senior Level Review of an application that meets prerequisite criteria, such as addictions, driving violations (drug or alcohol related), mental health issues, postgraduate training problems, dishonesty, etc.

- Conducts final review of the application file prior to sending it to licensure. This entails a recheck of all documentation to ensure all requirements are met and the ATS record is updated as well as detailing all steps in the ATS notes.

- Receives, responds to, and initiates telephone calls with applicants or those calling on behalf of the applicant. These calls can be as simple as applicant wanting status on his/her application, to the reviewer clarifying missing or corrected information from an international medical school.

- Receives, responds to, and initiates emails. These emails can be as simple as applicant wanting status on his/her application to the reviewer requesting and clarifying missing or corrected documentation from an international medical school.
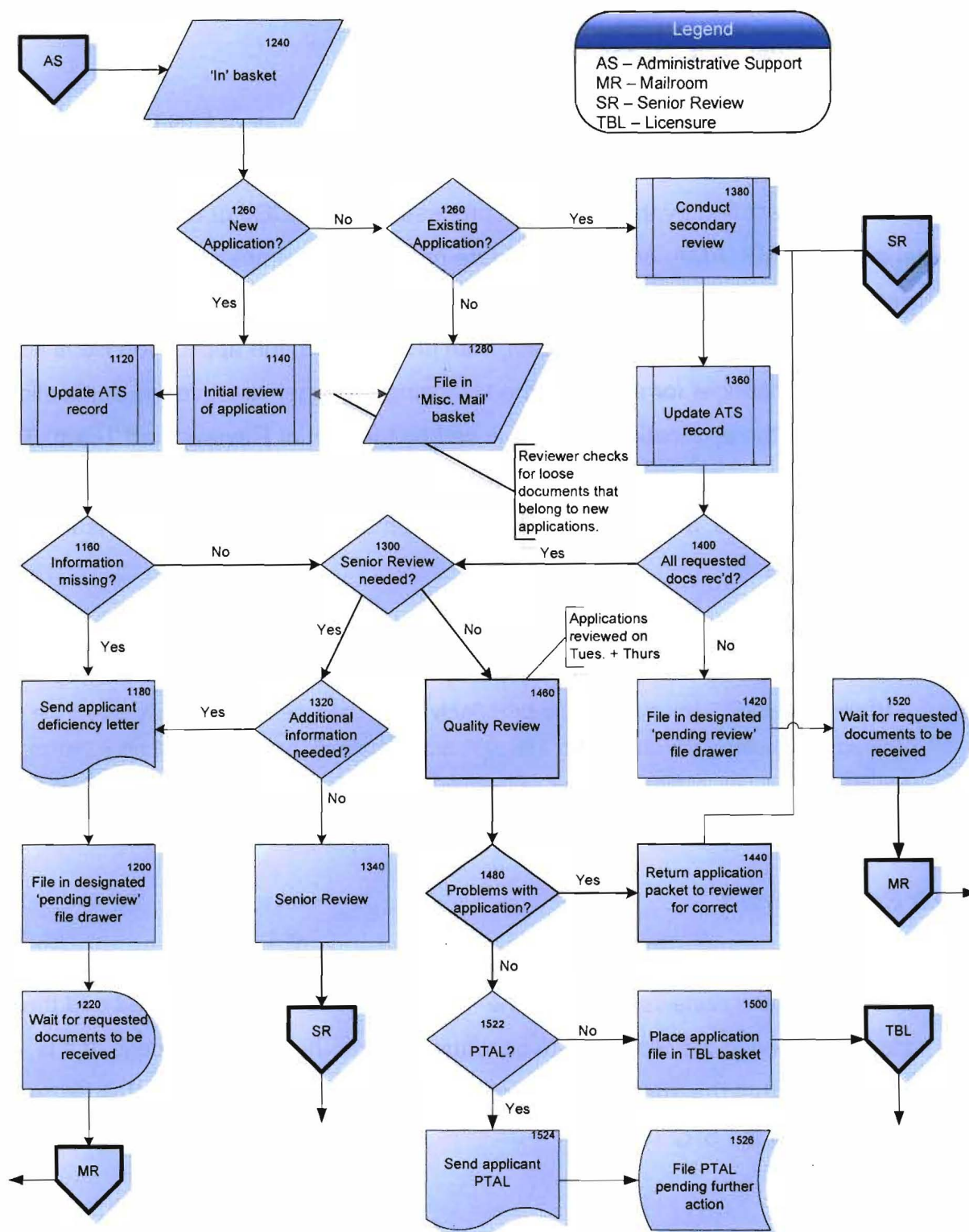
The Fingerprint Coordinator:

- Is the liaison with the California State Department of Justice (DOJ) regarding status and updates on applicants fingerprint cards and Live Scan submissions.
- Maintains a list of all fingerprint cards sent to DOJ.
- Packages and mails fingerprint cards to DOJ.
- Follows up on fingerprint cards and results that remain outstanding.
- Sorts, matches and distributes DOJ and FBI results to appropriate application reviewer.

Figure 21 - Licensing Program – Application Review Process Flow (AR)

Legend
AS – Administrative Support
MR – Mailroom
SR – Senior Review
TBL – Licensure

AS → **1240** 'In' basket

1260 New Application? — No → **1260** Existing Application? — Yes → **1380** Conduct secondary review ← **SR**

New Application? — Yes ↓
Existing Application? — No ↓

1280 File in 'Misc. Mail' basket

1120 Update ATS record ← **1140** Initial review of application

Reviewer checks for loose documents that belong to new applications.

1360 Update ATS record

1160 Information missing? — No → **1300** Senior Review needed? ← Yes — **1400** All requested docs rec'd?

1160 Information missing? — Yes ↓

1300 Senior Review needed? — Yes ↓ / No →

1400 All requested docs rec'd? — No ↓

Applications reviewed on Tues. + Thurs

1180 Send applicant deficiency letter ← Yes — **1320** Additional information needed?

1460 Quality Review

1420 File in designated 'pending review' file drawer

1520 Wait for requested documents to be received

1320 Additional information needed? — No ↓

1200 File in designated 'pending review' file drawer

1340 Senior Review

1480 Problems with application? — Yes → **1440** Return application packet to reviewer for correct

MR

1220 Wait for requested documents to be received

SR

1480 Problems with application? — No ↓

1522 PTAL? — No → **1500** Place application file in TBL basket → **TBL**

MR

1522 PTAL? — Yes ↓

1524 Send applicant PTAL → **1526** File PTAL pending further action

9.1.6   Senior Staff Review Business Process

Senior Review Business Process Overview

Senior Review may be required if an issue exists that may impair or limit the ability of the applicant to practice medicine safely. An issue can be disclosed by an applicant or an issue can be identified by the fingerprint process (through DOJ or the FBI) or another external entity (FSMB, AMA, or a postgraduate program). Examples of issues include serious mental health issues, academic problems, dishonesty and drug or alcohol use. If the issue is determined to require Senior Staff involvement, the application file is sent for the Licensing Manager for review. If the Licensing Manager approve the application for Senior Review the application file is reviewed by the Senior Review Staff Team. This team is comprised of a Senior Review 2 (SR2) Analyst, Deputy Attorney General (DAG), Legal, Executive, and Management staff. Senior Review Staff also consults with Medical consultants.

NOTE: Senior Review Staff Business Process Flows are currently in draft format as they have not been finalized by MBC staff. These process flows were being developed in Power Point by MBC staff when the BPR Study started. The BPR Study Team used the draft version to create the Visio copy included in this document. The BPR Study Team did not meet with Senior Staff to confirm the accuracy of these flows as verification is being completed by MBC staff outside the BPR Study.

Senior Review Level 1

- File sent for review goes to the Licensing Manager who enters required information and reviews the file. If the file is approved, ATS is updated and the file is returned to the Reviewer to continue through the routine process. If it is determined that the application needs to go to Senior Review Level 2, it is forwarded to the SR2 Analyst.

Senior Review Level 2

- If the file is determined to require a Level 2 Senior Review, the SR2 triage Analyst does an initial review. If additional information is necessary, the SR2 triage Analyst requests the information and/or documentation from the original source entity or the applicant.

- Once all information and/or documentation is available, the SR2 Analyst prepares a summary memo and circulates it to the Senior Review Staff Team for review. The Team will meet to discuss the file. If necessary, additional information and/or documentation may be requested of the applicant or other entities.

- Upon completion of the review, the Team will render a recommendation of an unrestricted license, probationary license, public letter of reprimand (PLR), [25]or denial of application.

  ○ **Unrestricted license** – If the recommendation is for issuance of an unrestricted license, the file is returned to the Reviewer to continue through routine processing.

  ○ **Probationary license** – If the recommendation is for issuance of a probationary license, the SR2 Analyst prepares a probationary stipulation document. Legal Staff is consulted as needed. The Licensing Chief reviews the document for accuracy. Once the document is ready, the Licensing Chief signed the document and it is mailed to the applicant for consideration of terms.

    ▪ The applicant has 60- days to respond. If no response is received, in most cases the application is deemed withdrawn. The applicant has the opportunity at this point to request an Administrative Law Judge (ALJ) hearing.

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[25] Effective January 1, 2009

- Upon an applicant's request for changes to facts or terms, the Licensing Chief and MBC Deputy Director or Executive Director will discuss the request, and if acceptable, a new probationary stipulation document is drafted and the process begins again.

- If the applicant accepts the facts and terms, the probationary stipulation is forwarded to Enforcement where a case in CAS is opened and the Board Members are mailed to probationary stipulation document for a vote.

- If the Board accepts the stipulation, the file is returned to licensing staff to complete the application process. If two (2) Board members vote no, it is brought to the Board for discussion and vote.

- If the Board rejects the stipulation, the SR2 Analyst mails an application denial letter to the applicant. The applicant has the opportunity at this point to request an Administrative Law Judge (ALJ) hearing.

- If the denial is accepted by the applicant, the file is stored in the "Red Drawer" (file room). Enforcement is notified of the status. The applicant is advised he/she can reapply in three (3) years.

- If an ALJ hearing is requested by the applicant, the SR2 Analyst prepares a transmittal and sends to the Supervising DAG. The case is assigned to DAG who will create a Statement of Issues.

- If necessary, DAG and applicant's attorney will discuss a stipulated settlement.

- Enforcement receives the proposed decision and mails to the Board Members for a vote. If the proposed decision recommends an unrestricted license and the Board agrees, the file is returned to the Licensing Staff to complete the file. If the recommendation is for a probationary license and the Board agrees, Enforcement serves decision and order on applicant to the Probation Unit and Licensing. Applicant has an opportunity to petition for reconsideration.

- A hearing is scheduled. The ALJ will issue a proposed decision recommending either (1) unrestricted license, (2) probationary license, (3) Public Letter of Reprimand [26] or (4) denial of application.

- If the proposed decision by the ALJ is for denial and the Board agrees, Enforcement notifies the applicant, at which time he/she may petition for reconsideration.

○ **Public Letter of Reprimand** – If the recommendation is for issuance of an license with a Public Letter of Reprimand, the PLR is identified on the Web site for three (3) years after the license is issued. The nature of the PLR is not identified.

○ **Denial of application** – if the recommendation is for the denial of the application, then just as with the Board's denial of a probationary stipulation the applicant has the opportunity to accept the decision and re-apply in three (3) years; or request an ALJ hearing.

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[26] Effective January 1, 2009

Figure 22 - Senior Review Process Flow (SR) - DRAFT

AR

Is it SR1 or SR2?
— SR1 → **Licensing Manager update ATS with req'd info and/or approval** → **File retuned to Reviewer for continued processing** → **AR**

— SR2 → **Licensing manager update ATS with SR2 status; fwd fiel to SR2 analyst**

Additional information needed?
— Yes → **SR2 analyst requests info/docs from applicant; reviews upon receipt** → **1520 Wait for requested documents to be received** → **MR**
— No ↓

Needs technical advice?
— Yes → **Discuss with attorneys, DAG, Med Consult, mgmt, and enforcement**
— No → **SR2 analyst prepares for senior staff review**

Additional information needed?
— Yes → **SR2 analyst requests info/docs from applicant; reviews upon receipt** → **1520 Wait for requested documents to be received**
— No ↓

Sr. staff recommend unrestricked license?
— Yes → **File retuned to Reviewer for continued processing** → **AR**
— No → **Sr. staff recommend probationary license?**
  — Yes → **SR2 analyst drafts probationary stipulation document**
  — No → **Senior staff has recommended denial of application** → **Denial letter sent to applicant**

SR2 analyst drafts probationary stipulation document → **Stipulation document sent to applicant**

Applicant accepts stipulation?
— No → **SR2 analyst discusses request with licensing chief and attorney**
— Yes ↓

Applicant's request acceptable?
— No → **Notifies applicant request not acceptable**
— Yes → **Enforcement opens case on CAS; mails stipulation to Board mbrs for vote**

Board approves?
— Yes → **Probationary license issued to applicant** → **TBL**
— No → **Denial of application sent to applicant**

Applicant challenges decision?
— Yes → **Case opened in CAS**
— No → **File application in "Red Drawer; applicant can reapply in 3 yrs.**

Applicant requests stipulated settlement
— Yes → **MBS and applicant discuss stipulated settlement**
— No → **ALJ hears case**

Agreement reached?
— Yes → (to Enforcement opens case)
— No → **ALJ hears case** → **ALJ**

Figure 23 - Licensing Program – Administrative Law Judge Process Flow (ALJ) - DRAFT
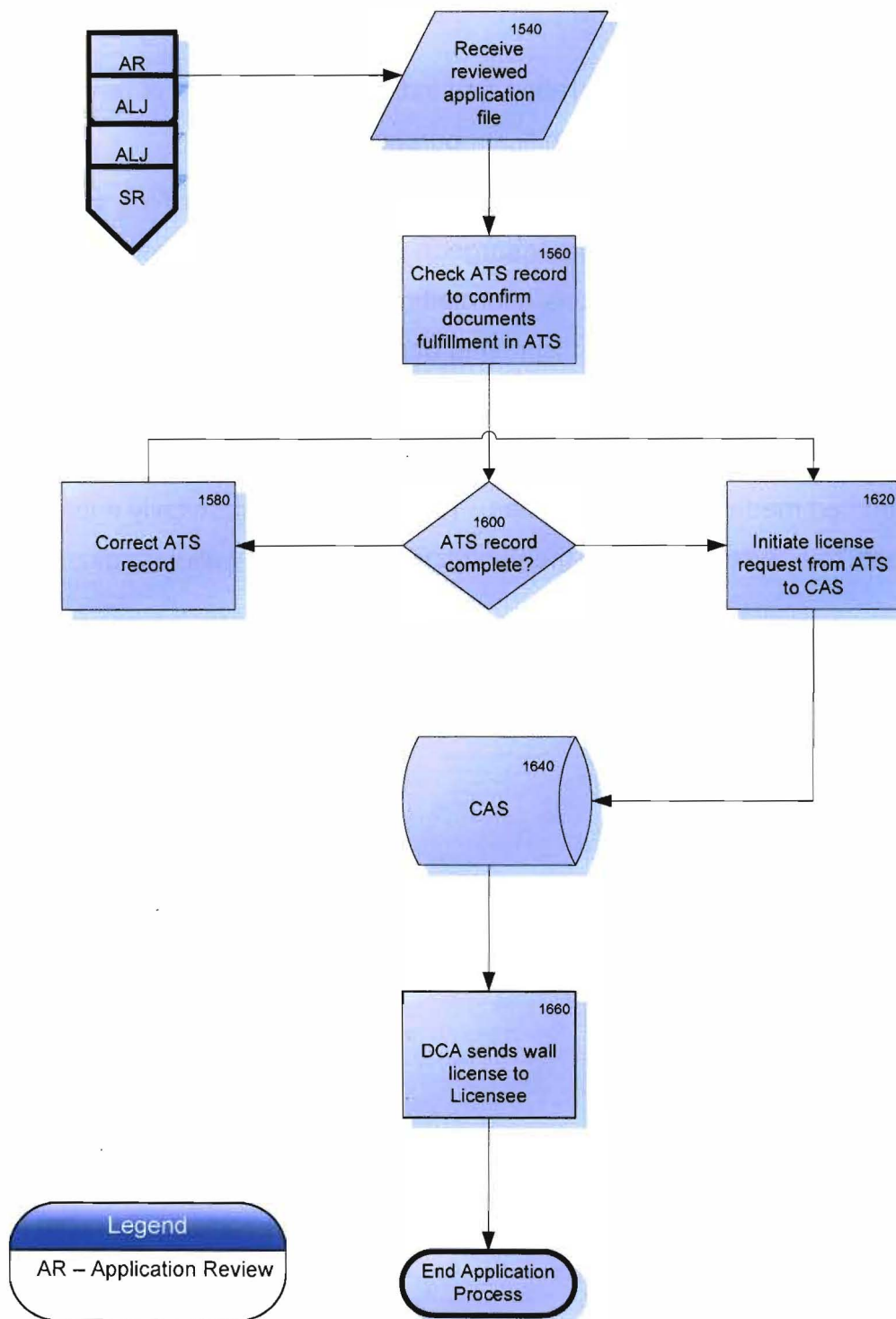
9.1.7   Licensing Business Process

The Licensing Coordinator:

- Conducts final review of the application file with the ATS record to verify all licensing data is accurate prior to submission for a license number. Verifies spelling of name, address, phone, and medical school.   Any errors are corrected.

- Initiates and runs computer program that transmits ATS licensing data to CAS for license to be issued.

Figure 24 - Licensing Program – Licensing Process Flow (TBL)

```
AR
ALJ
ALJ
SR
```

1540
Receive reviewed application file

↓

1560
Check ATS record to confirm documents fulfillment in ATS

↓

1600
ATS record complete?

← No → **1580**
Correct ATS record

→ Yes → **1620**
Initiate license request from ATS to CAS

↓

1640
CAS

↓

1660
DCA sends wall license to Licensee

↓

End Application Process

Legend
AR – Application Review

9.1.8 License Renewal Business Process

The Renewal Staff:

- Receive a daily Web Payment report that indicates the number of renewals each day. This report provides no significant purpose for staff.

- Receive a Change of Address report for updates made on the Web during renewal. This report lists all the physician or surgeon names and addresses of which staff visually edits to confirm appropriate formatting of address data. The purpose of this activity is to mitigate potential misprinting of plastic medical cards that are issued upon renewal.

- Initiate a weekly CAS program that generates a report containing all initial, renewal and updated medical card information. The report is electronically submitted to National Data Systems (NDS), the vendor who prints the wallet cards.

Figure 25 - Licensing Program – License Renewal Process Flow (RE)

1. Direct invoice from DCA 90- days prior to expiration.
2. Replacement invoice printed by MBC-CIU.
3. Renew via MBC website.

1680 Renewal notice sent to licensee

1700 Receive renewal by mail

CA

1720 Renewal online

1740 Change of address report

1860 Web payment report

Report is used as 'FYI' only

1760 Review for correct address formatting

Formatting checked to ensure correct printing on medical card

1780 Format correction needed?

No

Yes

1820 Weekly FTP file from CAS

1800 Correct CAS record

1840 NDS prints and mails licensee renewed wallet card

End renewal process

9.1.9   Consumer Information Unit (CIU) Process

Web Center functionality includes:

Standard Call Routing
Callers select options through a menu system that routes call to specific agents.

Web Callback
MBC also has a link on its Web site (www.mbc.ca.gov) that allows callers to request a callback. The input fields required for a callback are: name, company, email, phone and an option to schedule the callback (immediately, 30m, 60m, 90m, or a specific date and time). These internet requests enter Web Center like a call, but are sent directly into the Call Center's queue. The program code for the screen layout was provided by Verizon and integrated into the MBC Web site, so it is not easily updated.

Skill-based Routing
This functionality allows employees with special skills to be considered before a standard agent. For example, MBC could implement a tiered system based on the caller's response to the menu system and send them to a specific agent.

The CIU currently uses this functionality for Spanish speaking callers.

Web Chat
Web Chat is also known as a "live chat". A Web site user could select Web Chat and ask questions directly to CIU staff through the internet. This feature would also allow agents to send links or related information to the customers related to their inquiries.

The CIU does not currently use this functionality.

Email
When a caller leaves a voice message to an agent, a wav (audio) file is sent to that agent's email address.

Outcomes
Outcome Codes are assigned at the end of each call and specify the subject of the call (applicant question, complaint, fictitious name permit). Reports can be generated based on outcome codes.

Calls that are made to any of the primary public lines enter the Web Center server. Once calls are "inside" the Web Center, they are routed based on preconfigured settings better enable tracking, routing and control over each phone call. The settings are configured by the Web Center Administrator to provide flexibility. Basic settings include:

Menu System	This allows MBC to create custom menus that route calls based on the caller's input
Agents	The CIU staff providing telephone support are called "agents". Each agent has a profile established that includes what workgroups the agent is assigned to, skills set, and controls and restrictions.
Workgroups	All Web Center agents are logically grouped and assigned to a workgroup. These groups dictate what calls will go to which agents. For example, a call center agent is in the Call Center Work Group. Calls coming from the CIU phone lines are configured to route to the Call Center Workgroup and use pre-determined selection criteria to route the call to a specific agent.

The figure below shows the call tree when a caller places a phone call to the CIU.

Figure 26 – Web Center Call Tree
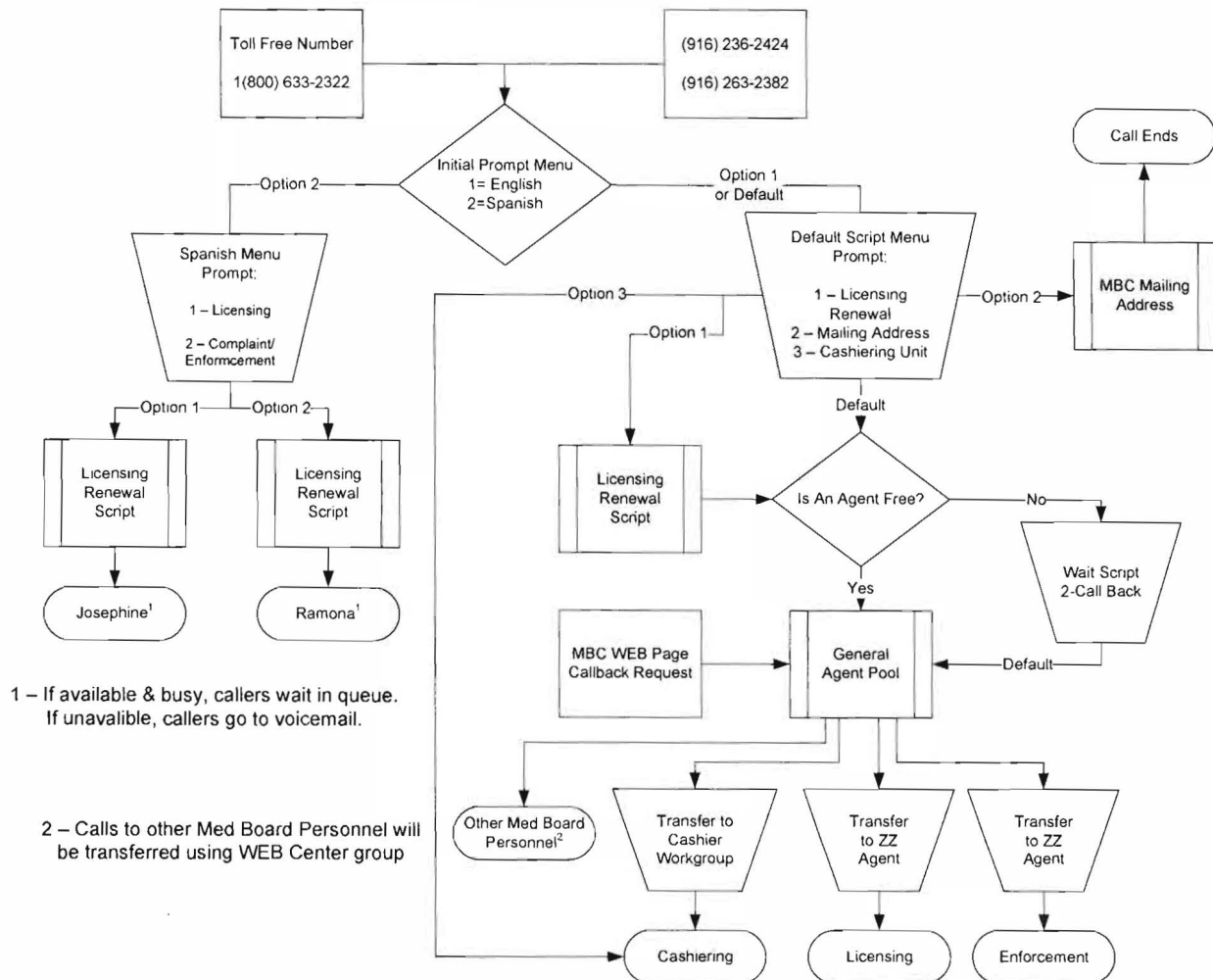
Within the menu system, music is played until an agent for the specific workgroup accepts the call. At 56-second intervals the caller is asked if they wish to input their phone number and receive a callback. If the caller opts to stay on the line, the music will continue playing until an agent accepts the call.

When the agent accepts the call, the caller identifies their specific need and the agent provides the appropriate information or transfers the call to the appropriate entity (such as to a specific Review Staff person). At the end of each call an agent is required to assign an outcome code. Outcomes identify the subject of the call. Reports can be generated based on outcome codes.

Data maintained for calls coming into the Web Center include agent name, length of time, outcome. Statistical reports are produced monthly and include several standard call center metrics such as abandoned call rate, wait times, and answer times.

9.2 FSMB Products and Services – Additional Information

Table 6 - FSMB Products and Services

FSMB Product or Service	Description and Additional Information
eTranscripts	**Description**: Provides an electronic version of the USMLE test score transcript through a secured portal. In addition, if any board action has been reported to FSMB, this information will be included in the eTranscript. This service is available at no charge to Medical Boards. An email notification is sent that the eTranscript is available. eTranscript can be used regardless of a physician's participation in FCVS. If a physician is using the FCVS service, the transcript will be included in the FCVS packet.
	State Medical Boards are not charged for this service. Fees for a physician to request a transcript be provided to a state Medical Board or other entity are $50. This fee allows for two transcripts to be provided.
	The Licensing Program currently uses the eTranscript service. It is a responsibility of an individual in the Administrative Support Staff.
	Observations: The eTranscript option provides a paperless method for MBC to obtain this information needed to fulfill examination requirements. The process to obtain this information has been established and Administrative Support Staff perform this function, but the BPR Study Team could not find any documented MBC-specific policy and procedures explaining this process. This process in its current state does not have any issues.
FCVS	**Description**: The Federation Credentials Verification Service (FCVS) was developed in 1996 to provide a centralized process and repository for state Medical Boards to obtain physician's medical credentials. The goal of FCVS is to reduce the overall time required to obtain a license. FCVS obtains primary source verification of medical education, postgraduate training, examination history, board action history, board certification and identity and creates a Physician Information Profile (packet) that can be sent to state Medical Boards.

FSMB Product or Service	Description and Additional Information
	The physician incurs all costs associated with the creation of the FCVS profile (packet) and directs where the FCVS packet should be sent. Base Cost is $295, with $50 examination transcript fees, and all shipping costs. IMGs incur additional fees associated with document translation. After an initial FCVS profile has been created there is a $90 charge for updates. A US/CAN FCVS profile takes, on the average, 80 days to create, updates take an average of 30 days. FCVS profile creation for IMGs averages 110 days for creation and 30 days for updates. The creation includes the obtaining several documents from multiple primary sources. Updates are required for any subsequent training. For example, if an FCVS packet is started when a physician is in PGT, updates would be required when PGT training is completed and any other training.
	Based on a conversation between the BPR Study Team and an FSMB representative, enhancements to FCVS are scheduled for implementation by the end of 2010.
	The Licensing Program currently accepts FCVS as long as the documentation meets State of California Requirements.
	Observations: Only selected documents in the FCVS packet are used in the Licensing Process at MBC and include: the ECFMG Certification, Postgraduate Training verification, the Medical School documents and USMLE scores. They may be used in the application processing as long as they meet statutory and regulatory requirements. The documents that are not used are retained until the application is submitted for licensing and then the unused documents are shredded. It is estimated that in a 40 page FCVS packet, up to 12 pages can be used.
	MBC allows applicants to use FCVS to submit credentials. FCVS packets are accepted, but not mandated by regulations. It is estimated that about 5% of applicants use FCVS (300 based on 6000 applications a year). Documents contained within the FCVS packet and used as part of the license application must meet current California law related to Licensing requirements. If the contents of the FCVS packet do not meet current California law, a deficiency notice is sent to the applicant and the document must be obtained from the primary source. The receipt of an FCVS packet is identified in ATS in the Notes section.
	An issue identified in the BPR Study was that FCVS documents sometimes do not

FSMB Product or Service	Description and Additional Information
	meet current California law and may result in a deficiency notice sent to the applicant. Examples include a required document contained a signature that appeared to be computer-generated. In that case, a deficiency notice would be sent to the applicant and the required document would need to be resent to MBC, delaying application processing. Another example is a packet where the Medical School documents were not "seal verified"; this resulted in a deficiency notice and delay. In theory, receiving all credential documents in a packet at the same time should save time. It saves mailroom time, as only one piece of mail is handled. It saves the applicant time as there is one central place that houses their credentials. Based on information gathered during this study, a general statement cannot be made that use of FCVS always facilitates the licensing of an applicant in California. Factors include whether the FCVS packet is in the application file at the time of initial review, if all required documents in the FCVS packet are accepted and if no other deficiencies exist in the application.
iPickup	**Description:** iPickup makes electronic copies of FCVS packets available to state Medical Boards through a secured portal. An email notification is sent that an FCVS packet is available. There are no fees to state Medical Boards or the applicant. This would replace the hardcopy FCVS packets that a state Medical Board currently receives. *The MBC Licensing Program does not currently use iPickup.* **Observations:** The iPickup option provides a paperless method for MBC to obtain FCVS packets. Of a 40-page FCVS packet, it has been estimated that up to 12 pages can be used in application processing. If iPickup is used, only necessary documents would need to be printed; the entire packet could be stored electronically at MBC. Benefits for MBC would be decreased mail at the mailroom, smaller application file size (taking up less file drawer space). Costs would be the time needed to set up process, obtain electronic copies and printing.
GME Connect	**Description:** An FCVS enhancement that allows PGT Programs to enter GME credentialing verifications online through a secured portal. This information is provided to state Medical Boards in the FCVS packet. Forms can also be printed for wet

FSMB Product or Service	Description and Additional Information
	signature. Information includes – Training level, specialty/subspecialty, attendance, completion information and unusual circumstance information (probation, disciplinary actions, behavioral issues). There is no charge to the GME for its use or the state Medical Board. *GME Connect is intended to be used by GME Programs as part of the FCVS Credentialing services. MBC could receive information generated from GME Connect as part of an FCVS packet.* **Observations**: This process is between GME Programs and FCVS. Further assessment would need to verify all information captured in GME Connect is contained on Forms L3A/B (Certificate of Completion of ACGME/RCPSC Postgraduate Training). If all information is in GME Connect, MBC should consider allowing the Postgraduate Training Program to submit a hardcopy form of the GME Connect data with a wet signature from the Program Director and Hospital seal or Notary.
Uniform Application & State-specific Addendum	**Description:** The Uniform Application (UA) is an online form used for Physician Licensing developed by FSMB. The form includes data that is common across multiple states such as demographic information, education and examination history. In addition to the Uniform Application, the State-specific Addendum is used as a supplement to the Uniform Application and contains state-specific questions not on the Uniform Application. The state Medical Board can retrieve the self-reported data through an online secured application or a .pdf option is available. The Uniform Application and the State-specific Addendum are accessed through the FSMB Web site (www.fsmb.org). These products can be part of an FCVS packet or completed separately. If an applicant is using FCVS, 70% of the data is pre-populated from FCVS[27]. Currently there is no cost to the state to develop a State-specific Addendum or use the Uniform Application. In the future, there may be a fee assessed for physicians using these forms. To implement this service, it is estimated to take about four months to complete assessment, develop a State-specific Addendum, test and implement. This timeframe does not include any changes to MBC processes, updates to communication-related components (Web site, policies and procedures,

[27] FSMB presentation: License Portability – Setting the Stage, slide 21:
http://www.docboard.org/aim/pdf/es09-fsmb.pdf

FSMB Product or Service	Description and Additional Information
	correspondence), or any technical changes required at MBC. From the documentation available to the BPR Study Team, 20 states are participating in either a paper version of the UA or an electronic version – mainly smaller states, with 15,000 or less licensed physicians. *The Licensing Program does not currently use the Uniform Application or the State-specific Addendum.* **Observations**: Standardized forms are used in other industries with success such as health care claims processing. Although there is currently no direct cost to the state Medical Boards there will be an indirect cost to state Medical Boards in resource time to work with FSMB to develop, implement and maintain the State-specific Addendum and the policies and procedures to go with the new forms and process. Additionally, it is not known if fees will be charged to the physician and how much they would be assessed. The California Department of Consumer Affairs (DCA) is developing an agency-wide online application system that will meet the application processing needs for MBC.
Expedited Licensure	**Description:** Expedited Licensure is a concept that supports license portability, a system of medical licensure that recognizes individual state and territorial jurisdiction while facilitating a process for obtaining and maintaining licenses in multiple states and territories.[28] License portability is considered necessary to address the mobility among physicians, growth of telemedicine and access to care issues. This concept would streamline the process for physicians licensed and in good standing in other states. It would recognize certain requirements as met because another Medical Board has already verified the fulfillment of those requirements. Each state would need to develop its own Expedited Licensure requirements. *MBC has not adopted any Expedited Licensing methodologies.* **Observations**: The term "expedited licensure" is not used at MBC. Business and Professions Codes § 2135 and 2135.5 provides Reciprocity under specific criteria for applicants having held a full and unrestricted license in another state for four or more years. Any other changes to current statutes and regulations could take years from

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[28] FSMB presentation: License Portability – Setting the Stage: http://www.docboard.org/aim/pdf/es09-fsmb.pdf

FSMB Product or Service	Description and Additional Information
	concept to implementation.

9.3 Recommendations – Additional Information

Each recommendation identified in this section includes the following information to facilitate evaluation by MBC Licensing Program staff:

- **Cost** - Cost is defined in terms of time, resources, and money, level of effort and magnitude of change.
- **Benefit** – What this recommendation will provide relative to MBC goals.
- **Metrics** – This information will identify metrics that can be used to measure the effectiveness of a recommendation once implemented. Metrics fall into two categories:
  - *Quantitative metrics* describe data in terms of a numerical representation. For example, there were 200 new applications that had an initial review completed in the month of November.
  - *Qualitative metrics* are measures that describe data in subjective terms including quality, relative characteristics, and properties. For example, a recommendation may result in the increased feeling of teamwork across the MBC Licensing Program Staff.

Quantitative metrics are more precise and often considered more valuable than qualitative metrics. However, there are situations where only qualitative metrics can be derived. In certain cases, it is possible to estimate quantitative metrics from qualitative metrics.

- **Additional Information** – This provides supplemental information related to the recommendation such as additional considerations.

9.3.1 Infrastructure

The section includes recommendations related to:

- Forms

- Policies and Procedures

- Internal Reports and Communications

- GME Outreach

- Outgoing Communication (and Correspondence)

- Consumer Information Unit (CIU)

- Statutes and Regulations

And includes the following recommendations:

Component	Id	Recommendation	Previously Identified by MBC Licensing Program
Infrastructure	IF-1	Continue to advance Policy and Procedure Manuals	✓
	IF-2	Increase Uninterrupted Time Available for Review Tasks	
	IF-3	Strengthen Program-wide Quality Assurance (QA) Processes	✓
	IF-4	Create Process to Capture and Assess Staff Suggestions	✓
	IF-5	Implement a Continuous Process Improvement (CPI) Program	✓
	IF-6	Revise Application and Instructions	✓
	IF-7	Implement Application Set-up Worksheet	
	IF-8	Integrate Checklist into Application	✓
	IF-9	Revise Fee Schedule and Licensing Invoice Letter	
	IF-10	Implement PTAL/License Application Update Form	
	IF-11	Continue use, advancement and monitoring of FSMB Products and Services	✓

Component	Id	Recommendation	Previously Identified by MBC Licensing Program
	IF-12	Resolve PTAL Issues and Implement Changes	
	IF-13	Update MBC Web Site Content for Applicant Tab	✓
	IF-14	Implement CIU Enhancements	✓
	IF-15	Assess Use of AMA's Physician Professional Data (PPD)	
	IF-16	Evaluate Viability of the Postgraduate (PG) Training Permit Concept	✓

IF-1 - Continue to Advance Policy and Procedure Manuals

Recommendations related to policies and procedures manuals include:

- Complete Application Policies & Procedures Manual and Create Update Process
- Enhance the Current Format of the Application Policies & Procedures Manual
- Develop Licensing Renewal Policies & Procedures Manual

Each of these items is discussed separately below. It is also recommended that a dedicated full-time employee be assigned to Policies and Procedure Manual and Decision Log maintenance. Having a dedicated resource will ensure the manual is kept current and activities identified in this recommendation are completed. If a resource is not dedicated to these tasks, it is likely that completion will be delayed due to conflicting priorities.

Complete Application Policies & Procedures Manual and Create Update Process

The primary sections of the Policies & Procedures Manual used in application processing, Sections 2 through 9, appear to have been finalized, but the entire the Policies & Procedures Manual has not been completed. The copy of the Policies & Procedure Manual provided to the BPR Study Team had section placeholders or sections that are not yet completed. Other sections have either not been finalized or not been started due to competing priorities of the current Licensing Program staff responsible for this manual.

In addition, this recommendation includes creation of an iterative process to regularly update the Policies and Procedures Manual and integrate items from the Decision Log. The process will ensure manual integrity and application review consistency.

Cost	- Time to review and update - Time to rollout to staff; may require training for MBC Licensing Program staff

	• Time for cyclical review and update • Dedicated resource to maintain Policies & Procedures Manual and Decision Log
Benefit	• Easier to read and locate information; fewer information "gaps" • Anticipated decrease in application processing errors • Anticipated increase in application processing quality
Metrics	• Qualitative metrics could be obtained through Review Staff and Administrative Support Staff feedback – does the new manual contain what you need to know to do your job? • Quantitative data on Application processing errors is currently collected through existing QA processes. Comparison of data collected prior to the implementation of this recommendation and after the implementation could be used to show a decrease in application processing errors.
Additional Information	• Consideration should be given to have a dedicated resource responsible for the alignment of all communication-related components (Such as Web site, Policies & Procedures (and Decision Log), and outgoing communication) • Policies and Procedures review comments will be provided to MBC under separate cover with Application revision recommendations.

Enhance the Current Format of the Application Policies & Procedures Manual

Enhancing the format of the current Policies and Procedures Manual support the principles of clear, concise and consistent information. In addition, format revisions should be designed to be easy to accomplish and facilitate future manual updates.

Recommended changes include:

- Use of heading and subheading styles within the document
- Different Table of Contents format
- Version Control (including footers and a revision log)
- Enhancing the manual layout using available MS-Word formatting options to increase readability
- Resolution of any missing information or inconsistencies

A sample of the proposed revisions to the Policies and Procedures manual is in Section 9.4.6, on page 248.

Cost	• Time to review and revise format and create iterative process • Time to rollout to staff; may require training for MBC Licensing Program staff • Time for cyclical review and update • Dedicated resource to maintain Policies & Procedures Manual and Decision Log
Benefit	• Easier to read and locate information; fewer information "gaps" • Anticipated decrease in application processing errors • Anticipated increase in application processing quality • Higher rate of autonomy for newer staff; less questions and interruptions to experienced staff • Quicker integration of updates to manual
Metrics	• Qualitative metrics could be obtained through Review Staff and Administrative Support Staff feedback – does the manual (with the Decision Log) contain all the information you need to do your job? • Quantitative data on Application processing errors is currently collected through existing QA processes. Comparison of data collected prior to the implementation of this recommendation and after the implementation could be used to show a decrease in application processing errors.
Additional Information	• Consideration should be given to have a dedicated resource responsible for the alignment of all communication-related components (Such as Web site, Policies & Procedures (and Decision Log), and outgoing communication)

Develop Licensing Renewal Policies & Procedures Manual

It is recommended that policies and procedures be created for the License Renewal process. As discussed in the observations, documented policies and procedures do not exist for the License Renewal processes. It is currently not an issue because of the minimal turnover in the Licensing Renewal staff.

Cost	• Time and resources to develop policies and procedures and an update process

	• Time and resources to maintain policies and procedures
Benefit	• Processing standards are identified • Easier to train new staff with policies and procedures
Metrics	• Quantitative metrics: None • Qualitative metrics: Improved consistency in processing
Additional Information	• Consideration should be given to have a dedicated resource responsible for the alignment of all communication-related components (Such as Web site, Policies & Procedures (and Decision Log), and outgoing communication)

IF-2 – Increase Uninterrupted Time Available For Review Tasks

This recommendation was developed during the time the Licensing program was focused on elimination of the backlog and assessing options that would allow Review Staff to focus on application review. This recommendation should be considered when there is substantial application workload.

OPTION 1 – Reclassifying existing CIU staff and/or augmenting CIU staff with properly trained resources would most likely free up Review Staff time spent on phone calls and emails. Possible changes to the Call Center intake process could limit the types of calls the newer staff would be answering. Reviewer's voicemail greetings could be updated with a message or incoming calls to Review Staff could be rerouted to the CIU for faster service.

Cost	• Reclassifying existing CIU staff • Acquiring and Training new CIU staff • Allocating space and equipment needed for new staff
Benefit	• Increased uninterrupted time for reviewers to complete initial reviews
Metrics	• Increase in initial reviews completed
Additional Information	• Proposal previously submitted to increase CIU by four (4) new staff, but was not approved.

OPTION 2: Temporarily relieve Review Staff from returning emails and phone calls within established timeframe when workload is high – Reviewers indicated they received an email memo indicating an expectation that emails and phone calls would be returned by the end of the following business day. If the timeframe of the current guideline is increased to provide some relief, Web site should be updated to communicate:

- MBC's commitment to completing initial reviews on all applications within regulatory timelines.

- The current receipt date of applications being reviewed (this will require weekly updates to the Web site)

Reviewer's voicemail greetings should also be updated and consistent with the information on the Web site. Once workload has decreased, the response time guideline for emails and phone calls can be resumed.

Cost	• Increased time for email follow-ups and callbacks • Possible escalation of calls to Executive Staff
Benefit	• Increased time for reviewers to complete initial reviews and process applications.
Metrics	• Increase in initial reviews completed
Additional Information	• NONE

IF-3 – Strengthen Program-Wide Quality Assurance (QA) Processes

As discussed in Section 6 - Recommendations, it is strongly recommended that quality assurance measures are continued and new measures are incorporated into the processes where appropriate. Often when the objectives are tied to measurement of output (such as increasing the number of initial reviews completed), quality can be comprised. It is necessary that both efficiency and quality be balanced in each and every action supporting MBC's mission of protecting health care consumers through the proper licensing of physician and surgeons.

Current quality assurance activities performed in the licensing and PTAL processes should be documented and further refined to maximize effectiveness and increase quality and consistency of application processing. Recommendations IF-7, Implement Application Set-up Worksheet, and IF-8, Integrate Checklist into Application, have incorporated additional quality assurance measures and allow quality assurance to be implemented earlier in the process.

Cost	• Time and resources to develop and maintain QA processes • Staff Training • Updating processes and procedures
Benefit	• Standardized processes • Reduced errors • Increased efficiency • Increased metric reliability • Increased staff morale
Metrics	• Quantitative: Reduction in errors, Increase in customer satisfaction • Qualitative: Improved work environment
Additional Information	• NONE

IF-4 - Create Process to Capture and Assess Staff Suggestions

Several process and procedural suggestions were identified in the training sessions for new Licensing Program Staff in October 2009. Existing staff frequently identified process and procedural issues and improvements during the BPR Study interviews. Currently, there is no established method or repository to capture staff suggestions for assessment and implementation. It is recommended that a repository be established to capture and a process developed to assess staff ideas and suggestions for possible implementation.

Cost	• Time and resources to establish process and repository • Time and effort to rollout the process • Time and resources to maintain the repository, assess and implement the recommendations
Benefit	• Suggestions from staff working in the environment are often viable and practical as they are based on knowledge and practical experience • Increased collaboration among the Licensing Program Staff • Increased morale among the Licensing Program Staff
Metrics	• Quantitative metrics: Qualitative metrics could be captured on number of suggestions provided and outcome of suggestions • Qualitative metrics: increased morale, feeling of teamwork
Additional Information	• None

IF-5 – Implement a Continuous Process Improvement (CPI) Program

The BPR Study Team recommends MBC consider the implementation of a Continuous Process Improvement (CPI) program in its long-range planning. The goal of a CPI program is to standardize and streamline processes, eliminate waste, and reduce errors. The benefits of a CPI program include error reduction, increase in efficiency and improved staff morale. Implementing a CPI Program requires executive sponsorship and must be led and championed by an organizational leader with access to knowledge in the selected methodology. There are many CPI methodologies; the most popular include Six Sigma, Lean Thinking, and Theory of Constraints. The table below shows a brief comparison of these CPI methodologies[29].

Table 7 - Comparison of Continuous Process Improvement (CPI) Methodologies

Program	Six Sigma	Lean Thinking	Theory of Constraints
Theory	Reduce variation	Remove Waste	Manage Constraints
Focus	Problem focused	Flow focused	System constraints
Primary Effect	Uniform process output	Reduced flow time	Fast throughput

Additional assessment is required by MBC to determine the CPI methodology that best fits the organization. Work products created for this BPR study, including the Business Process Flows, roles and responsibilities, and observations can be leveraged in the implementation of any CPI methodology.

Cost	• Time and resources to select a CPI methodology • Time and resources to implement the CPI program • Time and resources to maintain the CPI program • Staff Training • Updating processes and procedures
Benefit	• Standardized processes • Reduced errors • Increased efficiency • Increased metric reliability

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[29] "Process Improvement – How to Compare Six Sigma, Lean and the Theory of Constraints", Quality Progress – March 2002.

	• Staff empowerment
Metrics	• Varies based on methodology selected
Additional Information	• NONE

IF-6 - Revise Application and Instructions

The BPR Study Team supports MBC's plan to revise the application and instructions. Based on the BPR Study Team's review of the application and application instructions, revising the application and instructions would most likely result in less errors in applications submitted and fewer applicants calling the CIU and Review Staff.

Examples of recommended revisions include:

- Clarify notary area with signature and jurat – notaries are signing on the wrong line

- Reduce 11 pages of instructions

- Group similar questions together on the L1A – L1E

- Add extra line to exam section

Cost	• New/revised forms must go through Forms Management Process • Staff and time to review and update application, instructions and manuals • Possible updates to internal and internal communication • Training for MBC Licensing Program staff • Time and resources for cyclical review and update
Benefit	• Decrease phone calls to CIU or Review Staff as goal is to make instructions more clear and concise • Decrease number of errors found in Application Review • Increased quality of the application packets submitted to MBC
Metrics	• Quantitative metrics may be obtained through ATS to verify decrease in the application errors. This data could be derived from total number of deficiency letters and total number of errors within a deficiency letter. These metrics could be obtained at established intervals (6 months post-implementation and one-year post implementation). • Quantitative metrics from CIU showing possible decrease in CIU calls related to application instruction questions • Qualitative metrics could be obtained through Review Staff Interviews – are the applications received of higher quality? Are there fewer errors?

Additional Information	• Application revision recommendations will be provided to MBC under separate cover with Policies and Procedures review comments.

IF-7 - Implement Application Set-up Worksheet

The Application Set-up Worksheet would replace the current Application Worksheet (a.k.a. the "Pink Form") used by Administrative Support Staff and include tasks defined in Chapter 2 of the Policies and Procedures Manual related to application set-up. The checklist will consolidate and clarify Administrative Support Staff responsibilities related to setting up new application file folders and the subsequent preliminary review. Additional columns identifying task completion date, Administrative Support Staff initials and Quality Assurance (QA) information would assist in workload assessment and performance measurements.

Cost	• Replacement of existing form • New/revised forms must go through Forms Management Process • Training and possible updates to Policies & Procedure Manual • New process can result in uneasiness by staff accustomed to current "Pink" form • Time and resources to complete cyclical review and update of form
Benefit	• Increased ability to measure Administrative Support Staff task completion and accuracy • Better accountability of staff performing the work identified in the new worksheet
Metric	• Dates could be extracted from set-up sheet to determine duration applications are in application set-up and preliminary review. • Qualitative metrics could include staff feedback on usefulness and completeness of form and management feedback if form is helpful for assessing performance, quality and workload.
Additional Information	• The original and proposed *Application Set-up Worksheet* is included in Section 9.4.4.

IF-8 - Integrate Checklist into Application

Checklists are used to verify all required documents and forms are included prior to submission. Use of the Licensing and PTAL Application checklist could provide higher quality applications and fewer deficiencies out of the initial review process.

The Application checklist would be posted to the Web site in the application or the instructions for applicants to use as self-check before mailing application packet to MBC. The checklist and instructions would request the applicant return the completed checklist with the application. This would allow MBC Administrative Support Staff to crosscheck contents of application packet with a completed checklist.

The Application Checklist would also have additional information from the applicant not previously available to MBC (such as date applicant requested forms to be sent from primary source). The checklist would also reinforce that it is the applicant's responsibility to request or send forms to external entities.

If the applicant does not include the checklist in the application package or the checklist is incomplete, it would not constitute a deficiency. For those situations, Administrative Support Staff could complete an application checklist as part of the application set-up and preliminary review.

Cost	• New/revised forms must go through Forms Management Process • Checklist will need to be posted to Web site and included in the application packet • Training for CIU and Review Staff in the event questions arise regarding this Checklist • Possible short-term increase in CIU calls with questions on Application Checklist. A new outcome code should be used to track calls related to the new checklist. This would require documentation updates • Training for Administrative Support Staff to process (but using the form supports tasks related to the preliminary review). • Rollout to Review staff (it is not anticipated that Review staff will have any added responsibility related to this Checklist. It can provide additional information to the Reviewer). • Time for cyclical review and update of the Checklist • Additional document in application folder
Benefit	• Allows applicant to perform self-check before submitting the application packet to MBC resulting in the increased quality of the application packets submitted to MBC • Allows MBC to obtain some additional information (such as date applicant requested forms to be sent from primary source) • May decrease phone calls to CIU as checklist answers some applicant questions • May decrease number of errors found in application review • Format allows cross-check by Administrative Support Staff • Additional information is provided to MBC
Metrics	• Monitor CIU phone calls through an outcome code specific to Checklist questions. Take action based on outcome code • Quantitative metrics could be obtained through ATS to identify if there is a decrease in deficiency notices generated • Qualitative metrics could be obtained through Administrative Support Staff and Review Staff Interviews – are the applications received of higher quality? Are there fewer errors?
Additional Information	• The proposed *Application Checklist* is included in Section 9.4.3. • If the applicant does not include the checklist in the application package, it would not constitute a deficiency

IF-9 - Revise Fee Schedule and Licensing Invoice Letter

Interviews with Cashiering staff identified issues receiving the correct fees from applicants. These issues result in additional work for the Cashiering Staff and the Review Staff and possible delays in licensure. The BPR Study Team reviewed the following fee-related documents:

- The fee schedule included in the PTAL and license application
- The license invoice letter sent to the applicant near the time of licensing if license fees have not yet been received.

The review determined both of these documents require revisions to clarify the information and simplify the format on the documents. Samples of the original and revised fee schedule and licensing invoice letters are included in Section 9.4.2 (Fee Schedule) and 9.4.5 (Licensing Invoice). It is anticipated that the recommended revisions will resolve the identified issues.

Cost	• New/revised forms must go through Forms Management Process • Web site will require update with new fee schedule form • Rollout and training for Cashiering and Licensing Program • Any documentation (Policies and Procedures manual) identifying forms and letters will require updates
Benefit	• Clear and concise information to applicant anticipated to result in less fee-related errors • Decrease in CIU and Cashiering calls related to application questions
Metrics	• Quantitative metrics: Decrease in applicant questions related to fees. Fewer issues found by Cashiering. • Qualitative metrics: None
Additional Information	•

IF-10 - Implement PTAL/License Application Update Form

Under current policy, if an applicant would like to update any information submitted on the L1A-L1E, a new L1A-L1E must be completed. Interviews with Review Staff indicated the updated L1A – L1E often has errors unrelated to the updated information such as blank fields or conflicting information when compared with the previously submitted L1A-L1E. These errors result in the generation of additional deficiency letters, applicant resolution and added time for the applicant to obtain a licensure decision. The revised L1A – L1E requires additional time for Licensing Program staff to compare the original and submitted forms and review the content.

In the past, the L8 form was used by the applicant to provide updated application information. It is recommended that the Licensing Program create a special project to create and implement an update form to replace the use of the L1A – L1E for updates. The L8 can be leverage in the development of the new form.

Cost	• New/revised forms must go through Forms Management Process • Time and resources for MBC to develop new form • Time and resources for any documentation and Web site updates • Time and resources for training Licensing Program staff on new form • Possible short-term increase in CIU calls with questions on new form. A new outcome code should be used to track calls related to the new form.
Benefit	• Decrease in time to review application update • Decrease in errors or conflicts in update form result in fewer deficiency notices and reduced delays in licensure decision
Metrics	• Quantitative metrics: Fewer errors on application updates and decreased time to review updates • Qualitative metrics: None
Additional Information	• There are currently no metrics on what percentage of applications receive an update.

IF-11 – Continue Use, Advancement and Monitoring of FSMB Products and Services

Five (5) FSMB products and services were identified in Section 5.1. The following recommendation addresses the FSMB products and services.

- **eTranscripts** – This service is currently being used by MBC Licensing Program. The BPR Study Team did not have any further recommendations.

- **Federation Credential Verification Service (FCVS)** – The Licensing Program currently accepts FCVS documentation as long as the documentation meets State of California requirements. The BPR Study did not have any further recommendations.

- **iPickup** – The service is currently *not* used by MBC Licensing Program, but MBC is planning on continuing previous efforts to implement iPickup. The BPR Study Team supports MBC's plan to implement. A process will need to be established and documented in the Policies & Procedures manual once it is implemented.

- **GME Connect** – MBC should consider acceptance of a hard copy containing this information with a wet signature in lieu of an L3A/B (Certificate of Completion of ACGME/RCPSC Postgraduate Training). A crosswalk between the two forms identifying any gaps would assist MBC in determining its potential use.

- **Uniform Application and the State-specific Addendum** – Implementation of this will require significant MBC effort. The California Department of Consumer Affairs (DCA) is developing an Agency-wide online application system that will meet the application processing needs for MBC and significant MBC resources will be required to support that effort. In addition, based on the available information related to the Uniform Application and State-specific addendum, it is not known if in the future fees will be assessed for use (See Section 9.2, FSMB Products and Services – Additional Information page 152). The BPR Study Team recommends MBC does not allocate resources to assess or advance the use of Uniform Application and

State-specific Addendum at MBC at this time, but monitor FSMB developments on this product.

IF-12 – Resolve PTAL Issues and Implement Changes

A special project should be initiated to address and resolve the PTAL-related observations discussed in Section 3.8.4 - Observations – Application Review, page 60:

1. **Clarification if statute and/or regulation requires PTAL renewal while applicant is enrolled in a residency program** - Postgraduate Training Registration Form (Form 07M-175A) could be "linked" to a PTAL to extend the expiration of the PTAL as long as the resident continued in the same residency program.

2. **No limit to the number of PTAL renewals that can be issued** – Further research should be done to determine the average number of PTALs issued. This information may be used to determine if PTAL expiration should be extended beyond one year.

3. **No fees are assessed for a PTAL renewal** - Further research should determine PTAL renewal trends. A nominal fee should be considered if PTAL is valid for only one year because of the processing related to the application update.

4. **Files must be retained for several years, and are counted in a Review Staff inventory and overall workload** – A process should be created and a location identified away from the Review Staff to store all files once a PTAL has been issued. If a renewal is requested or a license application is received, Administrative Support Staff can retrieve the application file and provide it to the Review Staff. Once the application file is removed from an individual Review Staff file drawer, it should no longer be counted in the "Application Reviewed Awaiting Documents" category. A separate category of "Active PTALs" should be created. The "Active PTALs" could be managed as a separate special project by a single resource instead of by individual IMG Review Staff.

5. **PTALs require additional data in ATS to be effectively tracked** – The additional data may require a change to the data structure in ATS. Another option the BPR Study Team briefly discussed with ISB was the possibility of creating an additional Qualification Method 2102PTLL to identify License applications that had a PTAL issued. If this option is viable, the data for this applicant would be retained across two ATS records, linked by the ATS id of the PTAL.

6. **PTALs require additional and extended tracking** – There can be two distinct events for an IMG that participates in Postgraduate training in California: (1) An applicant submits an application and receives a PTAL and (2) an applicant that received a PTAL submits an application for licensure. There is a link between these two distinct events and licensure application processing is less complex because several of the documents are in the application file for the PTAL.

7. **PTALS require an additional level of reporting** – Due to the distinct events described above, PTALs require an additional level of reporting. Currently, an ATS record is opened when an applicant submits a PTAL application and can remain open until a license application has been approved; the timeframe can span several years. Current reporting is skewed when comparing licensure across qualification methods or timeframes from application receipt to licensure. PTAL reporting recommendations are included in the Reporting recommendations listed in Section 9.3.2.

8. **Remove applications from Review Staff files once PTAL has been issued and centralize storage** – This is discussed in number 4 above.

Cost	• Time and resources to create a Special Project • Time and resources to review and resolve issues • Space to store Application files with active PTALs • Licensing Committee and Board involvement for policy direction
Benefit	• Decrease in "Applications Reviewed Awaiting Documents" counts • Better management of PTALs • Better tracking of PTALs

	• Enhanced reporting of PTALs
	• Less files stored in IMG Review Staff files
Metrics	• Quantitative metrics: Enhanced PTAL reporting would provide better metrics
	• Qualitative metrics: Better PTAL management, tracking and reporting
Additional Information	• NONE

IF-13 – Update MBC Web Site Content on Applicant Tab

Clear, concise and consistent language across the Web site will most likely reduce CIU calls and result in MBC receiving higher quality applications. Web site changes should include:

1. Update application tab to more applicant-specific information (see Section 9.4.6 – sample updated web pages)

2. Separation of application from application instructions

3. Addition of PTAL-specific tab

4. Limiting the use of Webmaster to technical issues related to the MBC Web site. For non-technical inquiries, Web site should be updated to send to a general mailbox such as info@mbc.ca.gov.

5. Ability for applicant to send an email from Web Applicant Access System (WAAS) web page to MBC if there is a question. This may reduce calls to CIU. A separate general mailbox WAASinfo@mbc.ca.gov could be used if the Licensing Program would like to isolate WAAS-related emails, otherwise use info@mbc.ca.gov.

6. Additional fields in callback info where the requestor can include ATS info and the nature of the request so that CIU can be better prepared when returning the call. This may require changes to the CIU process.

7. Creation of a cyclical Web site review and update process

Cost	- Time and resources to review Web site and to create updates - Time and resources to update the Web site - Possible short-term increase in CIU calls with questions because Web site info is in a "different place" - Web site updates require rollout and/or training for MBC Licensing Program staff - Time and resource to check info@mbc.ca.gov and WAASinfo@mbc.ca.gov (this could be the same person that monitors the webmaster mail)

	• Time and resource to create processes • Time and resource to perform cyclical review and update of Web site
Benefit	• May decrease phone calls to CIU as goal should be to make Web site primary source of information for physicians and healthcare consumers.
Metrics	• Decrease in CIU calls • No current metrics are compiled for quality level of incoming applications (number of errors) so no before/after comparisons could be done.
Additional Information	• A sample of updated Web site content is in Section 9.4.6. • Consideration should be given to have a dedicated resource responsible for the alignment of all communication-related components (Such as Web site, Policies & Procedures (and Decision Log), and outgoing communication)

IF-14 – Implement CIU Enhancements

CIU Recommendations based on observations and interviews include:

1. Review Outcome codes and distributions monthly. If a single outcome code is over 15%, determine if additional codes are required. Outcome code "Other" is approximately 25% of total calls. Prior to Web Applicant Access System (WAAS) implementation in December 2009 "Applicant – application questions" totaled between 25% and 33% of outcomes codes.

2. Identify outcome codes statistics that indicate updates are needed to Web site, outgoing correspondence, or policies and procedures.

3. Determine if ATS id can be input prior to connecting with CIU agent; this could save call time once caller and agent are connected.

4. Regularly assess the call tree to determine if modifications are necessary.

5. Identify Web site as alternative to obtain information when caller calls CIU and is waiting in the queue. Call statistics should be tracked to see if there is a decrease in calls and Web site should be monitored to see if there is an increase in Web site traffic.

6. Web Center schedule needs to be fixed to allow scheduling more than one week in advance. Calendar updates should be allowed up to one year in advance. Currently, the calendar required weekly updates to indicate CIU is closed on the first, second and third Friday of the month due to furloughs.

Cost	• Time and resources to do research and updates • Time and management resources to regularly review reports and determine if corrective action is needed
Benefit	• Enhanced feedback loop between CIU and other licensing-related components • Increased focus on callers
Metrics	• Quantitative metrics: CIU call statistics, Web site traffic • Qualitative metrics: NONE

Additional Information	• NONE

IF-15 - Assess Use of AMA's Physician Professional Data (PPD)

It has been determined, at a high-level, that information is available through the AMA that identifies residents currently enrolled in California-based ACGME GME programs. The information is part of the AMA's Physician Professional Data (PPD) and is available for purchase through AMA Database Licensees. The BPR Study Team worked with the MBC GME Outreach Coordinator, a representative from the AMA, and an AMA Database Licensee distributor to determine the availability of data. Possible uses of this data include:

- An alternative method to obtain PGT Registration Form (Form 07M-175A) information

- Ability to verify all IMGs currently enrolled in a California-based ACGME GME program have a valid PTAL on file

- Increased ability for MBC Licensing Program management to project workload by identifying residents that will require licensure

- Increased ability for better and targeted GME outreach

The preliminary evaluation of this data supports this recommendation for MBC Licensing Program to move forward with further assessment to determine if AMA data should be purchase and use of AMA data.

Cost	• Time, resources and effort to complete evaluation of the AMA data • Time and effort to update outgoing communication related to Form 07M-175A if it is determined it is no longer required • Cost to purchase initial data and subsequent updates • Time, resources and effort to analyze the AMA data
Benefit	• Single source for data • Increased accuracy of data • Significant reduction (or elimination) in handling and processing Form 07M-175A processing if it is determined it is no longer required

Metrics	• Quantitative metrics: Processing cost savings if Form 07M-175A is no longer required, more accurate work load projections • Qualitative metrics: Enhanced GME Outreach
Additional Information	• Assessment must include determination if regulatory requirements will be met with AMA data. Currently CCR Title 16 § 2065 and 2066 require a resident to submit a PGT Registration Form (Form 07M-175A)

IF-16 – Evaluate Viability of the Postgraduate (PG) Training Permit Concept

If MBC considers the concept of a PG Training Permit to be viable, the BPR Study Team strongly recommends a special study to assess the efficacy of this major policy shift prior to placing any sizable effort in furthering the PG Training permit concept. The special study would require a comprehensive assessment identifying the likelihood and statistical significance that the PG Training permit process would identify ineligible applicants earlier than the current application process. The study should also assess impacts to resource and workload and identify required activities (for example, statutory and regulatory changes).

Cost	• Additional resources and time to do special study
Benefit	• Benefit stated in other available documentation indicates earlier identification of residents ineligible for licensure. This has not been confirmed.
Metrics	• NONE
Additional Information	• NONE

9.3.2 Information Technology (IT)

The section includes recommendations related to the Applicant Tracking System (ATS) and ATS-based reporting. Additional IT-related recommendations are included in this section if a recommendation would require involvement from ISB or DCA OIS.

Component	Id	Recommendation	Previously Identified by MBC Licensing Program
Information Technology (IT)	IT-1	Implement New Management Reporting Recommendations	✓
	IT-2	Track DCA/ISB Requests and Action Items	✓
	IT-3	Evolve ATS to address MBC needs	
	IT-4	Explore Ways to Increase Use of E-communication	✓
	IT-5	Assess Option for DCA/MBC ISB Secured Portal for Electronic L3A/B	✓
	IT-6	Actively Support DCA's Development of the BREEZE2 Database System	✓
	IT-7	Evaluate use of a Document Management System	

IT-1 – Implement New Management Reporting Recommendations

Additional and enhanced reporting is needed for effective Licensing Program management. Reporting recommendations listed in below are mainly ATS-related; some of the Administrative Support and QA reporting recommendations are outside of ATS, but included here for consistency.

Currently, ATS is not designed to produce these reports, but an ATS ad hoc reporting tool was made available to ISB and the Licensing Program in August 2009 to extract data from ATS and produce reports. The following table provides a summary of the recommended reporting identified in this section with current status and recommended priority (high/med/low). Some of the reporting recommendations identified in this section have already been implemented and are noted as such.

Table 8 - Reporting Recommendation Summary

Category	Id	Report	Is Report being produced? - - - - (A)utomated (M)anual[30]	Recommended Priority
Admin Support	01	How many applications received from mailroom waiting application-set up and preliminary review? (These are applications that have not been entered in ATS and require manual counting)	Yes (M)	n/a
Admin Support	02	Date of applications being currently processed in Administrative Support Processes (These are applications have not been entered in ATS and the information must be manually identified)	Yes (M)	n/a
Admin Support	03	How many applications completed application set-up and preliminary review processes? May require manual counting	No	Med
Admin Support	04	How many applications have been processed through the Z-project	No	Med
App Review	05	Backlog awaiting initial review (90+ days)	Yes (A)	n/a
App Review	06	Inventory awaiting initial review	Yes (A)	n/a

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[30] If Manual Reporting is currently done and data is in ATS to produce reports automatically, the BPR Study Team recommends automating the report,

Category	Id	Report	Is Report being produced? - - - - (A)utomated (M)anual[30]	Recommended Priority
App Review	07	PTAL and license applications with receipt date >= 1 yr awaiting documents to resolve identified deficiencies	Yes (M)	**High**
App Review	08	Approved PTAL applications with receipt date < 1 yr	Yes (M)	Med
App Review	09	Approved PTAL applications with receipt date >= 1 yr and no update	Yes (M)	Med
App Review	10	Regulatory compliance with the 60-working day initial review timeframe	Yes - adhoc (A)[31]	Med
App/PTAL issued	11	Regulatory compliance with the 100-calendar day licensure decision timeframe	No	Low
Other	12	Pended Mail Waiting for Review	No	**High**
Other	13.1	Deficiency Letter generation - Number of applications that had a deficiency letter generated.	Yes (M)	**High**
Other	13.2	Deficiency Letter generation - The number and type of deficiencies found	No	**High**
Other	13.3	Deficiency Letter generation - Number of applications that had multiple deficiency letters generated.	No	**High**
Other	13.4	Deficiency Letter generation - Time between deficiency letter generation and applicant response.	No	**High**
Other	14	Straight to licensure or PTAL	Yes (M)[32]	**High**
Other	15	Expired Test Scores	No	Low[33]
Other	16	Quality measurements	Yes (M) [34]	**High**
Other	17.1	PTAL - issuance	Yes (M)	**High**
Other	17.2	PTALs – renewal frequency	No	Med
Other	17.3	PTALs – PTAL to license issuance tracking	No	Med
Other	18	Application Outcomes to allow identification of abandoned applications	No	Low[35]
Other	19	Management Dashboard Reporting	Yes (A)	**High**

[31] Produced on an ad hoc basis during BPR study. Information can be derived from weekly inventory reports.

[32] Manual counts are for Applications going straight to Licensure only. No counts are currently available for Applications going straight to PTAL.

[33] Assessed as Low Priority because it is unknown the frequency of test score expiration that occurs, although during BPR Study interviews, test score expiration was identified as an issue in application processing, particularly with International Medical School Graduates (IMG).

[34] Data on current QA findings is collected manually and corrective action taken when appropriate.

[35] Assessed as Low priority because it is unknown if this

Cost	• Licensing Program staff and ISB time to prioritize and assess reports • ISB time to design and develop reports • MBC Licensing Program staff time to analyze report data and take subsequent action
Benefit	• Automation of reports will increase Review Staff time for application processing • The data can be used to assist in development of staffing plans and performance objectives (See Recommendation R-8, Establish program-wide performance objectives, staffing plans and metrics) • Increased accountability
Metrics	• Quantitative – based on report content • Qualitative – Have the report(s) provided better information to Licensing Program management? Have the reports streamlined workflow? Increased Review Staff time?
Additional Information	• NONE

Metric and reporting recommendations have been grouped by application processing order:

- Administrative Support Process (Application Set-up, Preliminary Review, Z-project updates)
- Application Review Process (through Initial Review)
- Application Review Process – Initial Review completed and Awaiting Documents
- Application Review Process – PTAL and License decision rendered

Additional metric and reporting recommendations outside of the Application Process are included at the end of this recommendation.

Administrative Support Process (Application Set-up, Preliminary Review, Z-project updates)

Some of these metrics are manually captured (self-reported) because an ATS record has not yet been created. Recommendation is to produce (or report if manually captured) weekly or monthly.

1. How many applications received from mailroom waiting application-set up and preliminary review? (These are applications that have not been entered in ATS and require manual counting)

2. Date of applications being currently processed in Administrative Support Processes (These are applications have not been entered in ATS and the information must be manually identified)

3. How many applications completed application set-up and preliminary Review? Is it within performance objectives[36]? (These are applications have not been entered in ATS and the information must be manually counted)

4. How many applications have been processed through the Z-project? Is it within performance objectives[37]? NOTE: this information can be derived through ATS data

Application Review Process (through Initial Review)

1. <u>Backlog awaiting initial review (90+ days)</u> - Split by US/CAN, IMG (and PTAL if needed) and Reviewer (or review group) – sorted by first char of last name/ascending, oldest app received date/descending (oldest first).

   • Should also have one list with all Inventory sorted by oldest app received date/descending (oldest first)

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[36] complete application set-up and preliminary review within 5 workdays, with a long-term goal of 2-3 workdays
[37] Complete WAAS update within 10-days of document receipt

- This report is currently being produced weekly

2. <u>Inventory awaiting initial review</u> – Split report by US/CAN, IMG (and PTAL if needed) – sorted by first char of last name/ascending, oldest app received date/descending (oldest first). Counts by 90+ days, 61-90 days, 31-60 days, 0-30 days.

   - Should also have one list with all Inventory sorted by oldest app received date/descending (oldest first)
   - This report is currently being produced weekly
   - Exception report should be created to show invalid data combinations such as qualification methods.
   - Another version of this report, to include 75+ days could be produced by reviewer (or reviewer group) to identify short-term (next 2 weeks) workload
   - Once backlog (90+ days) is eliminated, Management may want to split 61-90d into 61-74d and 75-90d since the goal is to get days to initial review down to 60d.

Application Review Process – Initial Review completed and Awaiting Documents

There is a category on the monthly workload report called "Applications Reviewed Awaiting Documents". Applications in this category are waiting documentation for further processing, such as waiting for documentation from an external entity to resolve identified deficiencies. Assumption is this category could include the following groups which are discussed in further detail below.

GROUP	Description
1	PTAL and license applications with receipt date < 1 yr awaiting documents to resolve identified deficiencies
2	PTAL and license applications with receipt date >= 1 yr awaiting documents to resolve identified deficiencies
3	Approved PTAL applications with receipt date < 1 yr
4	Approved PTAL applications with receipt date >= 1 yr and no update

General statistics need to be gathered on this data including application age, Qualification Method (QM) method and which group the application falls into. For

PTALs, general statistics should include date initial PTAL was issued and any renewal information (for each PTAL renewed).

For applications in group 2 (PTAL and license applications with receipt date >= 1 yr awaiting documents to resolve identified deficiencies) and group 4 (Approved PTAL applications with receipt date >= 1 yr and no update), the BPR Study interviews indicated an estimated 50% of applicants will update their application or request the application remain open once they receive notification from the Licensing Program indicating the application will be closed if no update is received, resulting in additional workload for Licensing Program staff.

> GROUP 1: *PTAL and License applications with receipt date < 1 yr awaiting documents to resolve identified deficiencies* – These applications are appropriate for Applications Reviewed Awaiting Documents Inventory.

> GROUP 2: *PTAL and license applications with receipt date >= 1 yr awaiting documents to resolve identified deficiencies* – Based on current regulations[38], MBC has the authority to close an application when an applicant does not exercise due diligence in the completion of the application. Failure to complete the application within one year constitutes failure to exercise due diligence. MBC may provide the applicant the option to update the application within 30 days or the application will be closed.

> To identify application files in this group, extract all ATS records over one year old based on application receipt date that do not have a licensure decision (no license or no PTAL, would be those waiting on documentation). Split by US/CAN, IMG (and PTAL if needed) – sorted by first char of last name (or reviewer group)/ascending, oldest app received date/descending (oldest first). Verify accuracy of the data.

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[38] CCR, Title 16 §1306

MBC should work with ISB to determine if letters (or emails) can be automatically generated (through ATS or another automated process) and if ATS can be automatically updated.

This work effort should be conducted semi-annually or quarterly and could be considered a "special project" for an identified resource. If possible, timing of this effort should be considered in the planning to avoid the "peak" period for application processing (January – June).

An additional option for this group is to extract all applications over six months old and send a "reminder" letter or email.

GROUP 3: *Approved PTAL applications with receipt date < 1 yr* – As discussed in the additional observations in the Application Review process, these applications will wait in inventory for at least one year and most likely longer. MBC should consider once PTAL applications have been approved, creating a new inventory category called "Approved PTAL Waiting for action" so these are not counted in the Applications Reviewed Awaiting Documents Inventory.

It may be helpful to the Review Staff if these files are removed from their areas and a process created to retrieve the file if/when a license application is received for an applicant that was issued a PTAL or some other action occurs on the file.

To identify application files in this group, extract only IMG and PTAL – sorted by first char of last name (or reviewer group)/ascending, oldest app received date/descending (oldest first). Verify data is accurate before further action.

GROUP 4: *Approved PTAL applications with receipt date >= 1 yr and no update* – The current PTAL is expired. Based on current regulations[39], MBC has the authority to close an application when an applicant does not exercise due diligence in the completion of the application. Failure to complete the application

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[39] CCR, Title 16 §1306

within one year constitutes failure to exercise due diligence. MBC may provide the applicant the option to update the application (requesting a renewal or providing a PGT Registration Form (Form 07M-157A)) within 30 days or the file will be closed.

This work effort should be conducted semi-annually or quarterly and could be considered a "special project" for an identified resource. If possible, timing of this effort should be considered in the planning to avoid the "peak" period for application processing (January – June).

Due to the current focus on initial review of applications, MBC has not processed PGT Registration Forms. Processing those forms is a prerequisite to further MBC action.

To identify application files in this group, extract all ATS records that are considered active, IMG or PTAL, that received a PTAL at least one year ago and have not had a license issued. Sort data by first char of last name (or reviewer group)/ascending, oldest app received date/descending (oldest first). Verify accuracy of the data before further action.

MBC should work with ISB to determine if letters (or emails) can be automatically generated (through ATS or another automated process) and if ATS can be automatically updated.

Application Review Process – PTAL and License decision rendered

1. Regulatory compliance with the 60-working day initial review timeframe – This information is available in ATS and has been provided in adhoc ATS reporting. Metrics are currently available on a summary level and by application type (US/CAN, IMG (and PTAL) applications). Average, minimum and maximum timeframes should also be calculated.

This reporting should be done monthly and included in quarterly and annual reporting to the Board.

2. Regulatory compliance with the 100-calendar day licensure decision timeframe - Current metrics capture total licenses issued and PTALs issued. There are metrics to identify the timeframe from application receipt to licensure, but that timeframe includes the time waiting for deficiencies to be resolved. The time period between the completion of the initial review and the MBC assessment that the application is complete is dependent on the responsiveness applicant and the external entities and is outside of MBC's control. For the purposes of regulatory compliance, this "wait time" occurs prior to the 100-day timeframe. Currently there are no metrics to identify the timeframe between the MBC assessment that the application is complete and the licensure decision.

Preliminary discussions have occurred between the Licensing Program Management, ISB and the BPR Study Team discussing possible options with current ATS data to capture metrics related to the timeframe between the MBC assessment that the application is complete and the licensure decision. In the current data structure, the date associated with the last document processed may be used to indicate the date the application was assessed as complete. A separate recommendation (See Section 9.3.2) identifies a change in ATS data may be required to easily extract this information. Review Staff will be required to update this field identifying the application has been assessed as complete.

If data in ATS could identify the "wait time", metrics could be created to determine the length of time it takes for applicant to resolve deficiencies.

Once these metrics are established, metrics should be reported on a summary level and by application type (US/CAN, IMG (and PTAL) applications) and by review type (standard, Senior Review). Average, minimum and maximum

timeframes should also be calculated. At a minimum, this reporting should be done quarterly and annually.

Additional Reporting Recommendations

1. <u>Pended Mail Waiting for Review</u> – The Mail Room receives mail separate from the initial application, sent either by the applicant or by an external entity. Pended Mail is defined as received mail, identified as belonging to an existing application, but not yet processed by Review Staff. Pended mail often resolves deficiencies identified during the initial review process and is normally processed in the order it is received. The counterpart to Pended Mail is Miscellaneous mail; Mail received, but there is no existing application file. Pended mail is entered into ATS by the Z-project staff soon after receipt so that an applicant checking application status online would know it has been received, but not yet processed. Pended Mail is a large part of the Review Staff workload and should have similar reporting to applications awaiting initial review to show oldest pended mail.

2. <u>Deficiency Letter generation</u> – Deficiency letters are sent to an applicant when an application is assessed as not complete. The letter identifies the deficiencies within the application. Identifying trends in application deficiency letters could result in updates to the application and instructions, policies and procedures, or the Web site. Discussions between Licensing Program Management and ISB would need to occur to determine if metrics are possible with current ATS data. Possible metrics to capture for analysis:

   - Number of applications that had one deficiency letter generated.
   - The number and type of deficiencies found
   - Number of applications that had multiple deficiency letters generated.
   - Time between deficiency letter generation and applicant response.

2. <u>Straight to licensure</u> – The data and metrics are currently available to identify applications that were considered complete *at time of initial review* and went

straight to licensure. The metrics are grouped by US/CAN and IMG. PTAL applications that go straight to licensure are not currently captured.

3. Expired Test Scores – Applications with expired test scores were identified during BPR Study interviews as a recurring issue and more common on IMG license and IMG PTAL applications. No current metrics are captured on applications with expired test scores, so the magnitude of this issue is not known. In the current data structure, expiration dates for test scores are not captured. A separate recommendation (See Section 9.3.2) identifies a change in ATS data may be required to capture this information.

    Once data is available to identify expiration dates for test scores, letters (emails) could be sent to applicants. MBC should work with ISB to determine if letters (or emails) can be automatically generated (through ATS or another automated process) and if ATS can be automatically updated.

    This work effort should be conducted semi-annually or quarterly and could be considered a "special project" for an identified resource. If possible, timing of this effort should be considered in the planning to avoid the "peak" period for application processing (January – June).

4. Quality measurements – Quality Assurance (QA) Review metrics are captured outside of ATS for the Z-project and Application Review processes. These metrics are assessed internally by the Licensing Program to identify trends, additional training needs, possible updates to the application and instructions, policies and procedures and Web site. A recommendation to revise the application set-up worksheet (See Section 9.3.2, IF-7) will provide data to create QA metrics for the Administrative Support processes (application set-up and preliminary review). Currently no data and metrics are available; if an error is made in the Administrative Support process, the Review Staff identify and correct the error before the starting the Initial Review process.

5. <u>PTALs</u> – PTAL issuance is currently tracked manually by the Review Staff. In addition, the current process and ATS data structure retains one application file (and one ATS record) for an applicant that receives a PTAL through licensure. This results in a different level of data collection and metrics to track initial application receipt to PTAL issuance, any PTAL renewals, and the application update that is the license application through licensure decision. MBC should work with ISB to determine how PTAL-specific metrics can be derived.

6. <u>Application Outcomes</u> – On an annual basis, reporting on application outcomes may provide value to MBC. This type of reporting would show the outcome of an application – licensed or not licensed by totals and percentages. Information could be provided in summary and by application type (US/CAN, IMG and PTAL). This information is available currently and was provided in ATS adhoc reporting during the BPR Study, but PTAL information included in the Application outcome report was skewed because of the reporting extract criteria. PTALs would require special reporting due to the current process and ATS data structure. This was discussed in the previous reporting recommendation. MBC would need to work with ISB to determine specific reporting requirements, specifically what would be included in the scope of not licensed (denied, withdrawn, closed, waiting for additional documentation).

7. <u>Management Dashboard Reporting</u> – Included in the weekly status to the Board is a "dashboard" view of application processing statistics including current inventory, application review and PTAL and license issuance. This dashboard reporting should continue and be refined as other types of metrics are available.

IT-2 - Track DCA/ISB Requests and Action Items

A DCA/ISB Request and Action Item log would assist in the identification and tracking of Licensing Program requests to both DCA and ISB.

The log should identify any requests or issues from the Licensing Program that require DCA or ISB services. Information in the log should include: Issue/Request description, whether DCA or ISB, date requested, date completed, point of contact (MBC and DCA or OSB), priority, status and comments.

A potential DCA request identified during the BPR study was to determine if it was possible through DCA to obtain phone and email statistics for Review Staff and phone statistics for Executive Office Administrative Staff.

Cost	• Licensing Staff time to create and maintain action item list • Additional time for DCA/ISB/Licensing Staff to define requirements, test and implement • Licensing Staff time to create process and reporting (if necessary)
Benefit	• Increased communication • Increased tracking and accountability
Metrics	Not applicable
Additional Information	• NONE

IT-3 – Evolve ATS to address MBC needs

ATS-related recommendations identified elsewhere in this report and through BPR Study interviews have been compiled in this section.

ATS issues identified during the BPR Study

ISSUE: Currently in ATS, data is erased when pathway is changed.
RECOMMENDATION: Remediation of ATS is needed to retain data when pathway is changed.

ISSUE: Currently, the online payment option does not accommodate separate payments by the applicant.
RECOMMENDATION: Remediation of ATS is needed to allow online initial license fee payment at a different time than application processing fee payment. Allowing initial license fee payment through the Web site if the application fees were paid via the Web site at an earlier time will expedite the receipt of fees and allow applications to go to licensure more rapidly.

Additional ATS-related modifications identified in other recommendations

1. Allow expiration date (or test date) to be entered so that reports (and perhaps letters) can be automatically generated related to expiring exam scores (Refer to Recommendation IT-1 for more information)

2. Allow enhanced PTAL tracking (Refer to Recommendation IF-12 for more information)

3. Define current fields or add fields to allow better tracking from date Review Staff determined the application is complete to date that application is licensed (Refer to Recommendation IT-1 for more information)

4. Define current fields or add fields to allow better deficiency notice reporting (Refer to Recommendation IT-1 for more information)

Cost	• DCA, ISB and MBC resources to assess, define additional requirements, test and implement
Benefit	• Varies based on specific ATS recommendation • Increased ability for ATS to meet MBC processing needs
Metrics	• Quantitative metrics: Varies based on specific ATS recommendation • Qualitative metrics: Varies based on specific ATS recommendation
Additional Information	• NONE

IT-4 – Explore Ways to Increase Use of E-Communication

There are two areas that use of e-communication should increase: applicant communication and external entity communication.

Based on current processes, there is a heavy dependence on hardcopy correspondence with the applicants. The Licensing and PTAL application provides the applicant an optional field for an email address. Email is sometimes used, but the communication method is primarily based on Review Staff preference. Increasing the use of e-communication with the applicant will streamline correspondence and reduce the time needed to resolve application deficiencies.

The current Licensing process does use email as its primary form of communication to notify applicants that a License application has been approved and to check the website to verify information that will be available to the public.

External entities are responsible for providing supporting documentation in the Licensing and PTAL application process. E-communication with external entities has increased through use of FSMB e-transcript and electronic receipt of fingerprint information. E-communication use with external entities will continue to increase with the implementation of FSMB iPickup for FCVS information and the implementation of a secured portal for Electronic L3A/B (Recommendation IT-5) if deemed feasible.

This recommendation supports further assessment of e-communication uses within the current processes.

Cost	• Time and resource(s) to assess what types of communication can be shifted to electronic forms • Time and resource(s) to create new processes • Staff training for new processes • Process shift may cause staff resistance
Benefit	• Streamlined communication • Improved communication with applicants and external

	entities • Quicker resolution of application deficiency or issues • Reduced mailing costs
Metrics	• Quantitative: Reduced mailing, lower costs, increase in e-mail communication, reduction in overall application processing time • Qualitative: Positive feedback from staff, applicants and external entities
Additional Information	• NONE

IT-5 - Assess Option For DCA/MBC ISB Secured Portal for Electronic L3A/B

Under the current process, the Certificate of Completion of ACGME/RCPSC Postgraduate Training (Form L3A/B) is only accepted in hardcopy with an original signature. ISB had begun research on the feasibility of a secured portal for GME Programs to transmit the L3A/B electronically to MBC. The BPR Study Team does not know the progress or current status of this project, but recommends the research and assessment be completed for further consideration. Electronic transmission of the L3A/B would reduce the current timeframes associated with this form.

Cost	• Time and resources to assess feasibility • Time and resources to implement the process • Time and resources to maintain the process • Time and resources to do outreach
Benefit	• Reduction in time associated with obtaining L3A/B from GME programs.
Metrics	• Quantitative: Reduction in time associated with obtaining L3A/B from GME programs
Additional Information	• This could be rolled out in stages, starting with select GME programs • Assessment should address need for original signature as electronic transmission will not have original signature

IT-6 – Actively Support DCA's Development of the BREEZE2 Database System

The California Department of Consumer Affairs (DCA) is in the process of developing an Agency-wide online application system that is expected to meet the application processing needs for MBC. It is anticipated this system will be implemented by December 2012. Additional information was not available during the MBC BPR Study for further assessment.

It is recommended that Licensing Program staff work with MBC Information Systems Branch (ISB) and DCA and actively participate in all phases of this project. Several observations and recommendations within this BPR Study Report identify items that should be considered for a new system; for example, the ability to generate reports (Recommendation IT-1), ATS-related modifications (Recommendation IT-3) and increase use of E-communication (Recommendation IT-4). It is critical that MBC-specific requirements are identified and included in the early phases of the BREEZE2 Database System development. Equally important is the participation of MBC staff in any testing and verification that those requirements have been appropriately addressed.

Cost	• Time and resource(s) dedicated to the project from requirements through post-implementation • Significant staff training as well as possible cultural shift during testing and implementation phases
Benefit	• An application processing system that meets MBC requirements
Metrics	• Status reports should be provided to track overall project progress and progress of MBC-specific items
Additional Information	• MBC Staff should track requirements provided to BREEZE2 project team and any other MBC-related activities

IT-7 - Evaluate Use of a Document Management System

A Document Management System (DMS) is a system used to track and store electronic documents and/or images of paper. The terms Content Management Systems (CMS), Electronic Document Management Systems (EDMS) are also used to identify document management systems. DMS is a component of an Enterprise Content Management System (ECMS) that integrates document imaging, workflow system and records management.

MBC may benefit from the implementation of a DMS. The BPR Study did not find any reports or other documentation to indicate a DMS has ever been considered. In the past, these types of systems were exclusively for large paper-intensive environments. MBC is relatively small with an annual estimate of 300,000 paper documents.[40]

Implementing an ECMS requires a significant amount of planning and resources and results in major changes to the current paper-intensive processes and workflow, but there are several long term benefits such as:

- Streamlined processes,
- Facilitates workflow
- Improved Tracking
- Reduced processing times

The California Department of Consumer Affairs Agency (DCA) may have an existing Document Management platform available for shared use or there are several other types. Information on California Records and Information Management (CALRIM) is available at http://www.osp.dgs.ca.gov/CalRIM/default.htm. The Web site contains several resources and State guidelines associated with Electronic Document Management

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[40] It is estimated each application has an average of 50 documents. Documents include everything sent and received. PTAL and initial license application volume was estimated at 6,200 per year. Renewals were not included because that process is already automated.

Systems. The Request for Information (RFI) process could be leveraged to obtain information from vendors.

A special study to assess the potential use, available options, and impacts of a document management system at MBC should be integrated into a high-level planning efforts. DCA may have an existing Document Management platform available for shared use. Information on California Records and Information Management (CALRIM) is available at http://www.osp.dgs.ca.gov/CalRIM/default.htm. The Web site contains several resources and State guidelines associated with Electronic Document Management Systems. The Request for Information (RFI) process could be leveraged to obtain information from vendors.

This effort should be coordinated with the implementation of DCA's BREEZE2 Database discussed in the previous recommendation, IT-6.

Cost	• Time and resources to create assessment • If DMS is implemented, there will be significant changes to all areas of the Licensing Program
Benefit	• Improved tracking • Streamlined processes • Facilitated workflow
Metrics	• Defined within Document Management System
Additional Information	• NONE

9.3.3 Resources

The section includes recommendations related to:

- Licensing Staff (Administrative Support Staff, Review Staff, CIU Staff, Cashiering Staff, and Renewal Staff)
- Executive Staff (GME Coordinator and Web Master)
- Organizational structure, staff-related reporting and metrics

and includes the following recommendations:

Component	Id	Recommendation	Previously Identified by MBC Licensing Program
Resource	R-1	Advance Staffing Recommendations	✓
	R-2	Reorganize Licensing Program and Reinforce Roles and Responsibilities	
	R-3	Restructure Administrative Support Workflow	
	R-4	Change Name of Consumer Information Unit (CIU)	
	R-5	Shift Clerical Tasks done by Review Staff To Support Staff	✓
	R-6	Continue to Create and Deploy Effective Training Programs	✓
	R-7	Continue to Work Inventory to Achieve Initial Review within 60 Calendar Days	
	R-8	Establish Program-wide Performance Objectives, Staffing Plans, and Metrics	

R-1 – Advance Staffing Recommendations

Several staffing-related challenges have been identified across different areas in the BPR Study:

1. California state government is experiencing its largest wave of retiring state employees in history. The CPR report, published in 2004, estimated between 34 and 49% of the States workforce (70,000 and 100,000) would be eligible for retirement between 2004 and 2009.[41] These retirements also result in a "brain drain" of the most experienced and knowledgeable staff and magnify the impact of the loss of resources. IMG Review staff had 50% attrition due to retirements.

2. Mandated furloughs have reduced the available staff hours.

3. Unreasonable staff to management ratios (20:1) for the Licensing Program Staff responsible for application processing.

4. The need for staffing flexibility to address workload fluctuations, particularly during the January – June timeframe.

5. The high concentration of temporary staff (Student Assistants and Retired Annuitants) on the Z-project.

6. The delay of several non-urgent but important projects (completion of policies and procedures manual, due diligence) due to competing priorities such as application processing and training new staff.

7. Increases in application volume and complexity over the past several years.

8. Annual increase in application volume requiring Senior Reviews.

9. Lack of centralized management for Administrative Support Staff.

10. High turnover rates in the CIU staff.

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[41] CPR Study (2004) - Creating a Workforce Plan for California State Employees
http://cpr.ca.gov/CPR_Report/Issues_and_Recommendations/Chapter_7_Statewide_Operations/Personnel_Management/SO43.html

11. "Floaters" are temporary staff. Currently, Student Assistants are used as floaters to conduct initial reviews for US/CAN applications. Two (2) Retired Annuitants are used as floaters for IMG applications most recently when staff retired as new employees were in their training period.

The following recommendations have been developed to address the staffing-related challenges identified above:

1. *Acquire two (2) additional managers under Licensing to reduce current manager to staff ratio (one from BCP)* to reduce staff to manager ratio to a more reasonable level for the application processing functions.

2. *Acquire one (1) additional manager under Licensing for Front-end processing functions* to replace temporary manager leaving January 2010.

3. *Acquire one (1) SSM II manager to oversee the 5 SSMI licensing managers.*

4. *Acquire three (3) new AGPA level new staff (2 from BCP) for senior review, quality review and training coordinator* to address increase and complexity of Senior Review and to ensure training programs are continually improved to meet current Licensing Program needs.

5. *Acquire two (2) new SSA positions (in addition to two hired 11/1/09 for IMG reviews) to act as staff "floaters"* to address workload fluctuations in US/CAN and IMG applications due to inventory fluctuations through the year, core staff absences and other short-term needs. "Floaters" should be permanent staff, not temporary staff, trained in one or more specific areas with no regular assigned workload. Current "floaters" are temporary staff; use of temporary staff presents a business risk.

6. *Acquire two (2) additional MST for US review (from BCP)* to address identified resource shortage.

7. *Acquire 2 permanent staff for Z-project (1 from BCP)* to reduce the current project risk associated with the staffing this project with non-permanent staff.

8. *Reclassify 2 front-end staff to MST level due to address changes in duties.* This is due to the varied skill sets required in the Administrative Support Staff application processing tasks.

9. *Continue use of Retired Annuitants, Student Assistants and overtime when workload is heavy* to address annual workload fluctuations.

10. *Reclassify CIU staff to higher level to recruit higher qualified staff to handle more complex licensing calls* normally referred to Review Staff and to lower high rate of turnover.

11. *Acquire one (1) dedicated resource responsible for the alignment of all communication-related components* (Such as Web site content, Policies & Procedures, Decision Log, and internal and external application-related communication).

12. *Acquire one (1) dedicated resource for performance reporting and ISB liaison.* There are a sufficient number of recommendations in these areas that once implemented, will require a dedicated resource to manage ongoing activities.

It is possible that additional CIU staff will be required, although it could not be determined how many additional CIU staff may be needed at this time. Call statistics for Review Staff and Executive Administrative Staff are not available to estimate the number of calls that could be rerouted to the CIU. Recommendations specific to routing calls to the CIU may be offset by the anticipated decrease in the calls due to the implementation of the WAAS project and upgrading job classification for CIU staff.

The table below provides a summary of the recommended staffing changes. Included in the table is the current staffing and staff added in FY10/11 as a result of the approved BCP.

Table 9 – Licensing Section - Current and Recommended Staffing[42]

Classification	Current Staff	Staff BCP will add in FY 10/11	Add'l Staff BPR Study Recommends	Notes
Staff Services Manager II (SSM II)	0	+0	+1	**BPR Study:** For managing 5 SSM I
Staff Services Manager I (SSM I)	2	+1	+2	**BPR Study:** Additional SSM I (2) to reduce staff to manager ratio and reorganize units to have similar functions.
Associate Government Program Analyst (AGPA)	3	+2	+2	**Current:** Special Pgms + Senior Review (1), IMG School approval + Senior Review (1), Training + Policies & Procedures + ATS (1) **BCP:** Senior Review (1), QA (1) **BPR Study**: Separate Training from Policies + Procedures (1), Reports + ATS and other infrastructure items (1)
Staff Services Analyst (SSA)	11[43]	+2	+2	**Current:** IMG Application + Caseload **BCP:** IMG Application + Caseload (2). **BPR Study**: "floaters" + assigned infrastructure (2)
Management Service Technician (MST)	7	+2	+2	**Current:** Licensing (1), US Applications + Caseload (6) **BCP:** US Applications + Caseload (2) **BPR Study**: Upgrade 2 OT to MST: Z-project (1) and restructure duties for front end staff (1)
Office Technician (OT)	3	+1[44]	-2	**Current:** Licensing and Application Support (3) **BCP:** Licensing and Application Support (1). **BPR Study**: Upgrade 2 OT to MST
***** Total Permanent Staff *****	***26***	***+8***	***+7***	
Retired Annuitant (RA)[45]	6	+0	+0	**Current:** IMG Application + Caseload RA-SSA (5),

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[42] No staffing additions or reductions were identified for the Licensing Operations Section.

[43] One (1) of the 11 SSA staff is equivalent to 0.6 FTE.

[44] One (1) OT identified is equivalent to 0.8 FTE.

[45] One (1) Retired Annuitant (RA) is equivalent to 0.5 FTE. Six (6) RA staff equal 3.0 FTE.

Classification	Current Staff	Staff BCP will add in FY 10/11	Add'l Staff BPR Study Recommends	Notes
				Z-Project RA-MST (1)
Student Assistant (SA)[46]	8	+0	-8[47]	**Current:** US Application (5), Z-Project (2), Licensing Imaging (1) **BPR Study:** Reduction can occur once seven (7) permanent staff has been allocated.
** Total Temporary Staff **	*14*	*+0*	*-8*	
** Total Staff **	**40**	**+8**	**+7**	**BPR Study:** 3 managers, 4 professional staff (training, reports + infrastructure projects, floaters, Z project, restructured front-end staff)

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[46] One (1) Student Assistant (SA) is equivalent to *up to* 0.75 FTE. Eight (8) SA staff equal *up to* 6.0 FTE.
[47] Reduction can occur once seven (7) permanent staff has been allocated.

The following table describes California civil service classifications and associated typical duties within the Licensing Program.

Table 10- Job Classification and Typical Duties

Classification	Typical Duties
Staff Services Manager I (SSM I)	Supervises and direct the daily activities of professional and technical staff responsible for review of applications; Conducts and directs workload and staffing standards issues; provides program expertise; acts as licensing technical expert
Associate Governmental Program Analyst (AGPA)	Performs the most difficult and complex research and analysis license application files such as Senior Review level 2, assessment of special training programs for physicians; develop and conduct staff training. Act as subject matter expert on Special Training Programs; Conduct analysis on statutes and regulations; Act as Lead analyst and consultant to management and/or appointed Board members; responsible for understanding and creating comprehensive management tools and data reports; Serves as liaison between MBC and ISB and DCA for technical systems; prepares licensing business process documentation; maintains Policy & Procedures manual; functions as lead analyst and performs quality control.
Staff Services Analyst (SSA)	Performs more complex analytical work associated with license application files such as review of International Medical School Graduate (IMG) applications. Receives, evaluates and recommends action on IMG license applications using evaluative, interpretive and constructive analysis; verifies completeness of application and supporting documentation, authenticates documents, examines for possible fraud. Consults with program manager for technical expertise on atypical applications.
Management Services Technician (MST)	Performs technical and analytical work associated with license application files such as review of U.S./CAN applications. Evaluates and recommends action on U.S./CAN license applications using evaluative, interpretive and constructive analysis; verifies completeness of application and supporting documentation, authenticates documents, examines for possible fraud. Consults with SSA and AGPA for technical expertise on atypical applications.
Office Technician (OT)	Provides clerical and administrative support to professional staff. Sorts mail, compiles new application file for subsequent processing, performs cursory review of documents, performs preliminary update of ATS data, and compiles fingerprint information.

Cost	• Time and resources to create BCP • Acquisition of additional resources • Reclassification of existing staff
Benefit	• Increased effectiveness of Licensing Program • Stronger infrastructure increases the likelihood of long-term sustainability • Increased capability to plan for and address annual workload fluctuations
Metrics	• Quantitative metrics: N/A • Qualitative metrics: N/A
Additional Information	• For additional information, refer to Recommendation R-2, Reorganize Licensing program and reinforce roles and responsibilities

R-2 – Reorganize Licensing Program and Reinforce Roles and Responsibilities

Several observations point to the need for reorganization of the Licensing Program into logical functional groups to better address the needs of the Licensing Program. This recommendation assumes all staffing recommendations identified in the previous recommendation, R-1, are implemented. Organizational changes could be modified if implemented before all staffing recommendations. Proposed organizational changes for the Licensing Program include:

- Creation of a new Front-end/Back-end unit under the Licensing Section with a permanent dedicated manager. This will include the front end-functions: Mail, Application set-up and the Z-project and the back-end functions: Licensing, Imaging and Renewals. Currently:

  o There is no permanent and centralized front-end unit. Under the Licensing Program structure, staff performing front-end tasks are organizationally supervised by multiple managers. A Manager has been temporarily assigned from the Enforcement Program to Front-end Staff, but is scheduled to leave January 2010.

  o The back-end functions are organizationally with Allied Health and Fictitious Name Permits (FNP) under the Licensing Operations.

- Restructure existing Application Processing Units to focus on only US/CAN or IMG. Currently the two units both do US/CAN and IMG application processing.

- Consolidation and realignment of infrastructure-related functions into one unit. Currently, infrastructure-related activities are spread across the Licensing Section. Infrastructure activities will increase with implementation of recommendations identified in this report. This unit will also be responsible for Senior Review 2 and Special Programs.

- Additional level of management to support the increase from two (2) to five (5) units in the Licensing Section. This level of management will report directly to the Licensing Program Chief.

The following figure shows the current Licensing Program Organization:

Figure 27 - Licensing Program – CURRENT
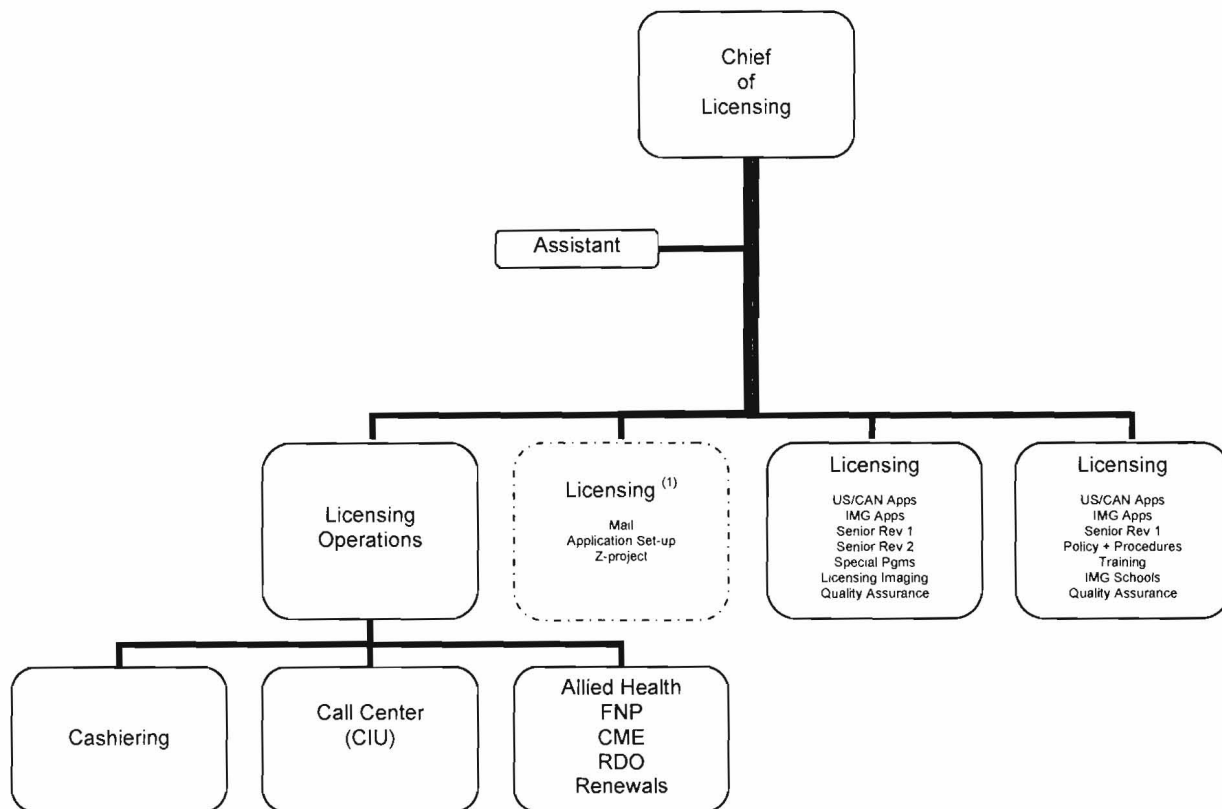
NOTES:

(1) Temporary reassignment from Enforcement – primary purpose was to establish WAAS program and organize new application file set-up duties for front-end staff.

The following figure shows the proposed Licensing Program Organization and assumes that all staffing recommendations identified in the previous recommendation, R-1, are implemented:

Figure 28 - Licensing Program – PROPOSED

Cost	• Change in current staff reporting – this may result in some staff pushback • Possible updates to internal policies and procedures
Benefit	• More consistent management • Better accountability and reporting • Better organizational alignment into functional groups • More appropriate staff to manager ratios
Metrics	• Quantitative: Increased reporting • Qualitative: Increased teamwork and staff satisfaction, increased ability to manage staff and workload
Additional Information	• A Manager has been temporarily assigned from the Enforcement Program to Front-end Staff starting October 1, 2009, but is scheduled to leave January 2010.

R-3 – Restructure Administrative Support Workflow

Restructuring the application set-up and preliminary review workflow in the Administrative Support process will address the varied skills required to complete the tasks. By compartmentalizing tasks, applications will have one entry and one exit point in the Administrative Support process. This will allow application files to get to Review Staff in receipt date order.

It has been determined that select Administrative Support positions will need to be reclassified due to the varied skillset required in front-end processing; this is discussed in Recommendation R-1, Advance Staffing Recommendations. Once the restructuring is implemented, regular and continued evaluation will ensure staff and workload balance are maintained with required tasks.

Cost	• Initial assessment of skillsets and required tasks • Continued assessment of staff assigned • Potential staff resistance as shift from completing tasks individually to team
Benefit	• Ability to address varied skillsets needed in front-end tasks • Promote "team" concept across Administrative Support Staff • Staff will develop expertise quickly in a few areas rather than mastering all Administrative Support Staff tasks, which takes more time • Faster recognition of workload issues and bottlenecks
Metric	• Currently, no performance metrics are collected for Administrative Support Staff functions. A separate recommendation is included in this document to collect metrics surrounding Administrative Support Staff tasks. • Based on current volume of applications received, three Administrative Support Staff needs to process approximately 130 new applications a week.
Additional Information	• Recommendation does require significant assessment and planning prior to implementation.

R-4 - Change Name of Consumer Information Unit (CIU)

This recommendation is to update the name of the CIU to more accurately reflect who it serves. Options include "Physicians and Consumers Information Unit" or "MBC Information Unit".

The MBC Web site states that:

> *"The mission of the Medical Board is to protect health care consumers through the proper licensing and regulation of physicians and surgeons and certain allied health care professions and through the vigorous, objective enforcement of the Medical Practice Act, and, to promote access to quality medical care through the Board's licensing and regulatory functions"*

The mission statement identifies health care consumers and physicians (and surgeons) as separate entities. On the MBC Web site, Under the "Contact Us" tab (see figure below), the name of the unit to call for License Verification, General Licensing, Application and Complaint Information is the Consumer Information Unit.

Figure 29 - MBC Web Site "Contact Us" Tab
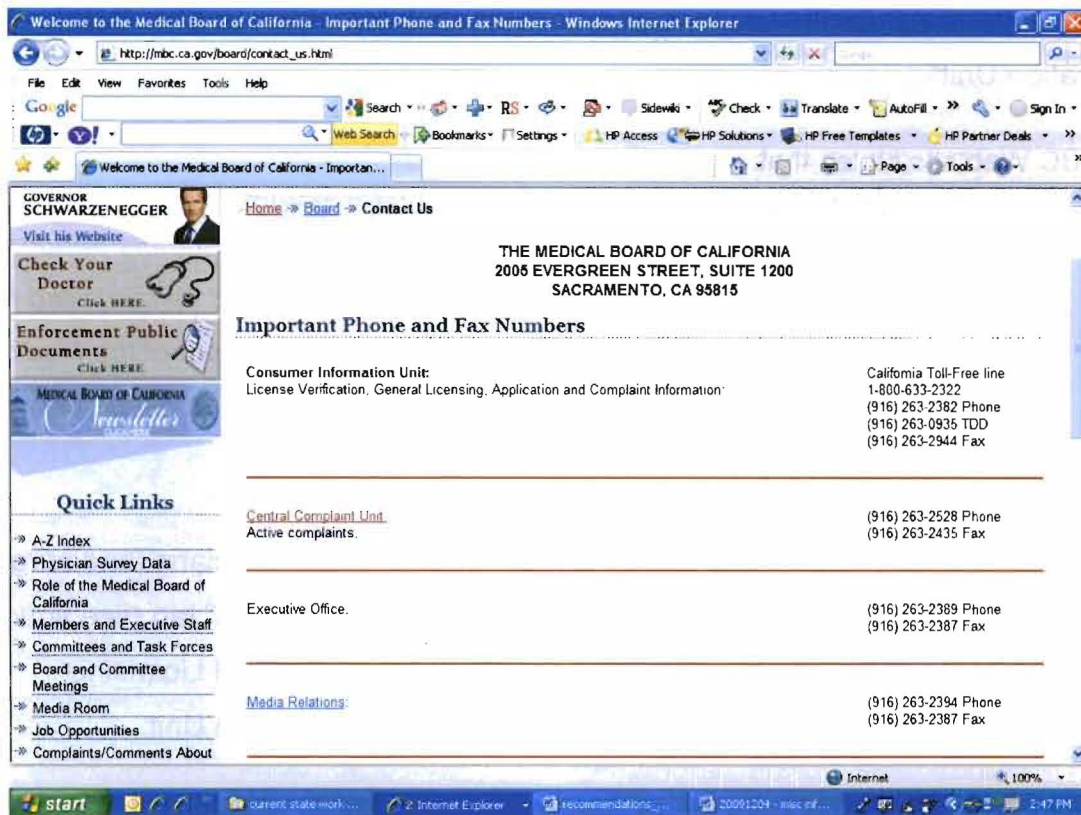
The name "Consumer Information Unit" may unintentionally result in physicians looking for another unit to contact for licensing and renewal questions, since physicians and surgeons may not consider themselves consumers. Following the information on the web page, the next reasonable choice would be the Executive Office. The BPR Study Team was located close to the Executive Office Administrative staff and did notice a significant number of calls to the Executive Office result in a transfer to the CIU. Metrics are not available to assess the number of incoming calls to the Executive Office that result in a transfer to the CIU.

The CIU phone greeting has recently been changed to identify itself to callers as the "Physician and Consumer Information Unit", but the Web site and other correspondence has not been updated to reflect the change.

Cost	• Time and resources to update the Web site (incl. appropriate review process) • Time and resources to update the Web Center call tree • Time and resources to update forms (incl. appropriate review process) • Time and resources to update correspondence (incl. appropriate review process) • Staff training
Benefit	• Probable reduction in calls to Executive Office Administrative Staff • Better call metrics
Metrics	• Quantitative metrics: NONE • Qualitative metrics: Executive Office Administrative Staff will experience less phone call disruptions
Additional Information	• NONE

R-5 - Shift Clerical Tasks Done by Review Staff to Support Staff

Interviews with MBC Licensing Program Staff identified that under the current process, there are clerical tasks performed by the Review Staff that may be more appropriate under the Administrative Support Staff functions.

Administrative Support processes should be expanded to include processing "Miscellaneous Mail" described on page 57 and other clerical tasks, such as putting the documents in the mandatory order prescribed in the Policies & Procedures Manual that are currently being done by Review Staff. This change will allow:

- The Administrative Support Staff to provide a more complete application file to the Review Staff

- The Review Staff to have less clerical tasks and focus on analytical tasks related to the Initial Review

- Overall, identification and assessment of clerical tasks performed by Review Staff should continue to determine if it is feasible to shift tasks to Administrative Support Staff.

Cost	• Realignment of current assigned responsibilities for both Review Staff and Administrative Support Staff • Possible need for additional Administrative Support Staff • Increased workload for Administrative Support Staff • Possible resistance from Staff • Additional Training and Quality Review
Benefit	• Increased time for Review Staff to perform initial reviews and other analytical tasks. Review Staff will no longer be sorting through Miscellaneous Mail. • Applications will be more complete when Review Staff starts initial review • Clerical tasks are aligned with clerical staff
Metrics	• Quality Assurance (QA) metrics are recommended to ensure mail is processed correctly. Risk is that "Miscellaneous Mail" is

	not handled correctly and an inaccurate deficiency notice is sent to an applicant. This risk exists in the current process.
Additional Information	• Compared with the other recommendations identified in this document, this recommendation is a significant change for Licensing Program Staff. Additional assessment and planning is required if this recommendation is selected for implementation. Special attention is needed to assess available Administrative Support Staff and skillset. Implementation must be carefully planned so that dramatic changes are not being implemented during "peak" periods or while there is a backlog, as often changes show a temporary decline in productivity until Staff is comfortable with the changes. • The BPR Study Team is aware that in the past, processing Miscellaneous Mail was a Administrative Support Staff function. Further planning and remediation will be necessary to ensure the issues that caused Review Staff to take over the Miscellaneous Mail function are addressed appropriately.

R-6 – Continue to Create and Deploy Effective Training Programs

Multi-day training programs were developed and deployed during September and October 2009 to train newly hired Administrative Support, Review Staff and CIU staff. The training included an overview of MBC and topics specific to an individual's role and responsibilities. Efforts must continue with a dedicated resource to maintain and refine existing training programs and develop new training programs based on identified needs; this will create a professionally satisfying work environment for MBC staff.

Cost	• Dedicated resource allocated to create, refine, maintain and deploy training programs • Staff time for training
Benefit	• Professionally satisfying work environment for MBC staff
Metrics	• Quantitative: Staff feedback in the form of surveys can be used to identify quality of training. QA metrics should be used to assess efficacy in training programs. • Qualitative: Staff surveys, increase in Quality measurements
Additional Information	• NONE

R-7 – Continue to Work Inventory to Achieve Initial Review Within 60 Calendar Days

As described in Section 3 - Licensing and Postgraduate Training Authorization Letter (PTAL) Processes, current regulations require the initial review of an application completed and the applicant informed of any deficiencies within 60 working days (approximately 90 calendar days) from the application receipt date.[48] At the start of the BPR Study, application inventory was in a backlog status; initial reviews were not being completed within the regulatory timeframe of 90 calendar days. Significant effort and focus was placed on the elimination of the backlog and the backlog was eliminated by December 23, 2009. The reports and work products developed during the BPR Study provide better tools for management to identify aging inventory, staffing needs, and workload fluctuations. Use of these tools will prevent the recurrence of a backlog.

The BPR Study Team recommends that Licensing Program staff continue to work at its current pace until initial review is completed within 60 calendar days. Creating a 30-day "buffer" of time will allow the Licensing Program Management staff sufficient time to identify and address issues, such as multiple staff absences or extended absences, that may cause a recurrence of a backlog situation.

The initial review time should not drop below 60 calendar days. As discussed in Section 3.8.4 - Observations – Application Review page 52, the period of time between application receipt and the start of initial review allows the required supporting documentation to be received and processed. Based on discussion with MBC Licensing Program Staff, it is assumed if initial reviews were completed any sooner than 60 days, there would be an increase in deficiency notices generated due to supporting documentation not yet received.

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[48] CCR, Title 16 §1319.4

Cost	• Continue working at the current pace – additional analysis needed to determine estimated duration
	• Probable continuation of overtime – additional analysis is needed to determine overtime needs
Benefit	• Creation of appropriate "buffer" of time to identify and address issues that may cause recurrence of backlog
Metrics	• Quantitative: Downward trend for application age, distribution of older applications
	• Qualitative: Improved staff morale
Additional Information	• NONE

R-8 – Establish Program-wide Performance Objectives, Staffing Plans, and Metrics

Performance Objectives

Performance objectives provide goals and are used to develop staffing plans, identify resource issues (shortages and overages) and assess actual performance. Performance objectives should be established for all areas within the Licensing Program. Performance objectives should also be refined to contain a quality component; when the objectives are tied to only a measurement of output (such as increasing the number of initial reviews completed), often quality can be comprised.

Based on historical data, high-level application processing performance objectives should be based on receiving approximately 130 new applications a week. During "peak times" (January – March), goals should be based on receiving 150 new applications a week. Lower level application processing performance objectives should be based on:

- Staff experience level
- Application type - there is an observed difference in the complexity and volume of supporting documentation between IMG and US/CAN applications
- Case load
- Other staff responsibilities – including reviewing pended mail, responding to phone and email inquiries and meetings

The BPR Study Team worked with MBC Licensing Program staff to create preliminary performance objectives for the Application Review staff. Quality measurements were not integrated into these preliminary performance objectives, but should be in the near future. The BPR Study Team discussed with MBC Staff the feasibility of performance objectives for Administrative Support Staff, but objectives have not yet been developed. The CIU has not established Performance objectives.

Staffing Plans

Staffing plans use performance objectives and available staff to identify how current workload will be completed. A staffing plan includes:

- Existing staff and planned new hires

- Furlough days, holidays, vacation, and personal time off

- Reasonable and estimated unanticipated time off for illness and other emergencies

- Performance objectives for each individual staff based on assignment and experience

Staffing Plans should be reviewed and assessed weekly with adjustments made to address current workload. This review and assessment is also used to identify staffing shortages or overages and help determine if it is a short-term or long-term issue; this information is necessary to identify the appropriate corrective action. Information from the plans and performance tracking should be made available to staff to show plan and progress; it is important everyone is made aware of the work to be done and energized toward the same goal.

The BPR Study Team worked with MBC Licensing Program staff to create preliminary staffing plans for the Application Review staff. The Staffing Plan template developed for the Application Review staff can be leveraged for other areas in the Licensing Program. For Application Processing, staffing plans can be created up to three months in advance now that the Licensing Program has better workload (inventory) reporting and historical data on application receipts.

Performance Metrics

Metrics provide information on the actual work completed. Performance metrics should be compared with the performance objectives. The comparison may result in or

Adjustments to the performance objectives or in some cases, individual staff performance metrics that consistently fall below performance objectives can indicate additional training or other remediation is needed. Performance objectives and metrics should be continually monitored and refined.

The Licensing Program established Review Staff performance metrics prior to the start of the BPR Study. These metrics required Review Staff to perform manual counts because automated reporting of ATS data was not yet available. An adhoc reporting tool was procured in August 2009, shortly before the start of the BPR Study. The BPR Study Team worked with MBC Licensing staff and ISB to identify the metrics that could derived from the available data. ISB and the MBC Licensing staff are working towards automation of these reports in addition to other metric-related reports. The process to develop performance metrics for application review can be leveraged in other areas of application processing. Other types of performance metric reporting is discussed in Recommendation IT-1.

The Consumer Information Unit (CIU) currently has performance metrics produced automatically through Web Center. .

It is also recommended to assign dedicated staff to update and maintain performance objectives, staffing plans and performance metrics. Currently, some of the work is done by individuals assigned other duties including application review. Often when resources are not dedicated to this effort, competing and higher priorities can prevent ongoing use of these management tools.

Cost	• Staff time to create and maintain performance objectives, staffing plan and metrics • Staff time to review and analyze performance metrics and then recommend and implement corrective action • New concept may cause initial staff resistance
Benefit	• Better management tools • Increased ability to plan for workload fluctuations, identify issues in advance, prevent recurrence of backlog

	• Increased communication between management and staff related to objectives and workload
Metrics	• Quantitative metrics will be created as part of this recommendation
Additional Information	• All objectives should be consistent with timeframes communicated in external communication (Web site content, correspondence, reporting)
	• Initial goal for Administrative Support Staff is to complete application set-up and preliminary review within 5 workdays, with a long-term goal of 2-3 workdays. Z-project goals should be consistent with processing timeframes communicated outward related to the Web Applicant Access System (WAAS) project. Currently the processing timeframe identified on the Web site is ten days.

9.4 Sample Forms and Web Pages

9.4.1 Postgraduate Training Registration Form (Form 07M-175a)

NOTE: This form required no updates and is included as reference

MEDICAL BOARD OF CALIFORNIA
LICENSING PROGRAM
2005 Evergreen Street, Suite 1200
Sacramento, CA 95815
(800) 633-2322   (916) 263-2382   FAX (916) 263-2487
www.mbc.ca.gov

POSTGRADUATE TRAINING REGISTRATION FORM

To be completed by every medical graduate who is not licensed in California and who will commence an ACGME/RCPSC accredited postgraduate training program in California. Please complete the information below and return this form to the Licensing Program of the Medical Board of California at the above address. The filing of this form with the Board will fulfill the registration requirements specified by law.

1. NAME: Last First Middle	
2. Date of Birth: ___ ___ / ___ ___ / ___ ___	3. U.S. Social Security Number: ___ ___ ___ / ___ ___ / ___ ___ ___ ___
4. Home/Mailing Address:	

5. Telephone Numbers: (include area code)	Home	Work	Cell

6. Name and Address of Medical School of Graduation:	7. Date Medical Degree Issued ___ ___ / ___ ___ / ___ ___ ___ ___

8. Is this your first postgraduate training year in the U.S.? ❑ Yes ❑ No	9. If no, list all other ACGME/RCPSC accredited postgraduate training programs in which you participated, whether or not the program was completed or credit was granted.

10. Name and address of facility where training is to be completed:	ACGME 10 digit program number ___ ___ ___ ___ ___ ___ ___ ___ ___ ___

11. Name of the program director:	12. Program director's telephone number: ( )
13. List categorical specialty area of training to be completed:	
14. Beginning & Ending Dates of this program: From ___ ___ / ___ ___ / ___ ___ ___ ___ To ___ ___ / ___ ___ / ___ ___ ___ ___	
15. I HEREBY DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT I HAVE READ THE LAWS, AND THAT THE FOREGOING INFORMATION CONTAINED IN THIS DOCUMENT IS TRUE AND CORRECT. Signature _____ Date _____	

**COMPLETION OF THIS FORM IS REQUIRED BY SECTIONS 2065 AND 2066
OF THE CALIFORNIA BUSINESS AND PROFESSIONS CODE.**

07M-175A (Rev. 12/05)

9.4.2 Revised Licensing Fee Schedule

Applicant Last Name **** DRAFT ****	Applicant First Name **** DRAFT ****	Date of Birth MM/DD/YYYY

FEE SCHEDULE Application for Physician's and Surgeon's License
- or -
Post Graduate Training Authorization Letter (PTAL)

Pay online at http://www.dca.ca.gov/proflic/medicalbd.shtml -or- Make certified check, cashier's check, money order or personal check payable to: MEDICAL BOARD OF CALIFORNIA (Fees are subject to change)			Amt Enclosed
Part 1: Application Fee			
Total Non-Refundable Application Fee The application fee includes a Non-Refundable Fingerprint Processing Fee of $51.00. DOJ Fingerprint processing is required. Fingerprint fees do 'not' include any additional fees that may be incurred through the party that rolls or electronically scans your fingerprints	Required	$ 493.00	
Part 2: License Fee (only applicable for those applying for a Physician & Surgeon's License)			
Initial License Fees are required, but may be deferred until application has been approved. To reduce delays in issuing a license, remit the initial license fee at the time you submit this license application. If license fees are deferred, you will be invoiced for the initial license fee once the license application has been approved and this may cause a delay in issuing the license. Initial License Fee ($808.00) or Reduced Initial License Fee ($416.50) - If you are <u>actively participating</u> in an ACGME/RCPSC accredited training program <u>at the time of licensure</u> you may be eligible for the reduced initial licensing fee. To verify your current enrollment and participation, you will need to submit Form L4 (Certificate of Current Postgraduate Training Enrollment) along with your payment. Initial License Fee Refund - If you are not issued a license but have paid the initial license fees, the license fees will be refunded to you. Initial License Expiration - Upon final approval of your initial license application, your California Physician and Surgeon license will be issued and valid for <u>up to</u> two years. The license expiration date is based on your birth <u>month</u>. If you wait until your birth month for licensure, your license will be valid for the full 24-month period. Should you choose to be licensed as soon as possible, this time will be shortened to as few as 13 months – dependent upon your birth month.			
Initial License Fee -or- **Reduced Initial License Fee**	Required	$ 808.00 - or - $416.50	
Part 3: Voluntary Fee			
You may voluntarily contribute $25.00 to provide training for family physicians and other primary care providers who will serve medically underserved rural and inner city Californians, refugees, the frail elderly and people with AIDS. This voluntary program was established as a result of legislation authored by the late Dr. William Filante and is supported by the California Medical Association, the California Academy of Family Physicians and other leading health care organizations. Dr. Filante's bill authorized the State's Office of Statewide Health Planning and Development (OSHPD) to accept contributions from certain foundations, health maintenance organizations, health insurers, and other entities to augment this primary care training programs, which are located in hospitals throughout California.			
Family Physician Training Fee	Voluntary	$ 25.00	
	TOTAL FEES ENCLOSED		

Original:

MEDICAL BOARD OF CALIFORNIA
Licensing Program

FEE SCHEDULE: APPLICATION FOR PHYSICIAN'S & SURGEON'S LICENSE OR POSTGRADUATE TRAINING AUTHORIZATION LETTER (PTAL)

APPLICATION FEES

1. **Required Non-refundable Application Fee:**.. **$442.00**

2. **Required Non-refundable Fingerprint Processing Fee:**... **$ 51.00**
Fingerprint processing fee is required by the DOJ. Additional fees may be incurred through the party which rolls or electronically scans your fingerprints.

3. **TOTAL REQUIRED NON-REFUNDABLE APPLICATION FEES:** _____ | **$ 493.00** |

LICENSE FEES

4. Initial License Fee: _____ $808.00

You may wish to remit the initial license fee with your application and fingerprint fees to reduce processing time. The initial license fee is $808.00. However, if you are <u>currently enrolled</u> in an approved ACGME or RCPSC accredited training program, you are eligible for the <u>reduced initial licensing fee of $416.50.</u> To verify your current enrollment in a training program, you will need to submit a *Certificate of Current Postgraduate Training Enrollment (Form L4)* along with the $416.50 reduced initial licensing fee.

<u>PLEASE NOTE: Both the initial license fee and the reduced license fee specified above include a *mandatory* payment of $25 to the Physician Corps Loan Repayment Program per section 2436.5 of the Business and Professions Code. The payment must be made at the time of application for initial licensure.   Applicants for a PTAL are not required to pay the licensing fee at the time the application is submitted but the applicable fees must be paid prior to the issuance of a medical license.</u>

Upon final approval, your California Physician and Surgeon license will be issued and will be valid for up to two years; the expiration date is based on your birth month. If you wait until your birth month for licensure, your license will be valid for a full 24-month period. Should you choose to be licensed as soon as possible, this time will be shortened to as few as 13 months - dependent upon your birth month. It is only necessary to wait until the birth month, not the exact date of birth.

5. **VOLUNTARY** $25 FAMILY PHYSICIAN TRAINING FEE *(please see below for information)*
   ☐ Please check here if you wish to contribute to the Physician Training Fund
       and ADD $25.00 to your payment   .... $ 25.00

You may voluntarily contribute $25 to provide training for family physicians and other primary care providers who will serve medically underserved rural and inner city Californians, refugees, the frail elderly, and people with AIDS.

This voluntary program was established as a result of legislation authored by the late Dr. William Filante and is supported by the California Medical Association, the California Academy of Family Physicians and other leading health care organizations. Dr. Filante's bill authorized the State's Office of Statewide Health Planning and Development (OSHPD) to accept contributions from certain foundations, health maintenance organizations, health insurers, and other entities to augment these primary care training programs, which are located in hospitals throughout California.

| $ _____ .00 |

TOTAL (APPLICATION PLUS LICENSING) FEES ENCLOSED..

MAKE CERTIFIED CHECKS, CASHIER'S CHECKS, MONEY ORDERS, OR PERSONAL CHECKS PAYABLE TO:
MEDICAL BOARD OF CALIFORNIA

(Fees subject to change)

07A-03 (Revised 07/01/09)

2005 Evergreen Street, Suite 1200, Sacramento, CA 95815-3831   (800) 633-2322   (916) 263-2382   FAX: (916) 263-2567   www.mbc.ca.gov

Page 241

9.4.3 Sample Application Checklist

APPLICATION CHECKLIST

Please include with the application package

Applicant Last Name:	Applicant First Name:		Applicant Date of Birth: MM / DD / YYYY	
Applicant Other Last Name:	Applicant Other First Name:		For MBC Use Only (ATS #)	
Medical School (check one) ☐ US/CAN ☐ IMG	Type of Form (check one) ☐ LICENSE ☐ PTAL		For MBC Use Only (QM (Pathway))	
If your are using the assistance of a Licensing Service Provider, please indicate name (e.g., FCVS):		For Applicant Use	Additional Comments	For MBC Use
Fees for ALL Applicants				
• Completed Application Fee Schedule.......		☐		☐
• Check or Money order............................ **OR**		☐		☐
• Copy of online payment receipt...................		☐		☐
Forms L1A-L1E : *Application for Physician's & Surgeon's License OR Postgraduate Training Authorization Letter*				
Current Version of Forms				
• L1A – 4/2008 version........................		☐		☐
• L1B – 12/05 version.........................		☐		☐
• L1C – 12/05 version.........................		☐		☐
• L1D – 12/05 version.........................		☐		☐
• L1E – 11/4/08 version.......................		☐		☐
• No blank fields...............................		☐		☐
• Public address used, not personal address................		☐		☐
• Each page has Name and Date of Birth		☐		☐
• Applicant's name is printed on the "By" line in notary box on L1E..........		☐		☐
• Notarized...................................		☐		
Fingerprints				
• Copy of Livescan Receipt (CA only)........................... **OR**		☐		☐
• Two (2) completed fingerprint cards...........................		☐		☐
Supporting documentation (as applicable):				
• Official medical school transcript...............................		☐		☐
• Official examination scores...		☐		☐
• Certified copy of medical degree................................		☐		☐
• Official Letters of Good Standing...............................		☐		☐
• Detailed narrative to support a 'Yes' response to questions 14 -38...............................		☐		☐
Form L2: *Certificate of Medical Education*				
• Current L2 – 12/05 version......................................		☐		☐
• Mailed to each medical school attended........................		☐		☐
• Date(s) mailed (put in additional comments box)...........................				
Forms L3A – L3B: *Certificate of Completion of ACGME/RCPSC Postgraduate Training* *** Not Required for PTA L***				
• Current L3A/B – 12/05 version......................................		☐		☐
• Part 1 completed by applicant..............................		☐		☐
• Mailed to each postgraduate training program attended...		☐		☐
• Date(s) mailed (put in additional comments box)...........................				

APPLICATION CHECKLIST

Please include with the application package

	For Applicant Use	Additional Comments	For MBC Use
Form L4: Certificate of Current Postgraduate Training Enrollment *** If Applicable*** *** Not Required for PTAL ***			
• Current L4 – 12/05 version......................................	☐		☐
• Part 1 completed by applicant..................................	☐		☐
• Mailed to current postgraduate training program............	☐		☒
• Date(s) mailed (put in additional comments box)............................			

***IMG ONLY FORMS ***

	For Applicant Use	Additional Comments	For MBC Use
Form L5: Certificate of Clinical Clerkships			
• Current L5 – 12/05 version......................................	☐		☐
• Part 1 completed by applicant..................................	☐		☐
• Mailed to each medical school attended......................	☐		☐
• Date(s) mailed (put in additional comments box)............................			
Form L6: Certificate of Clinical Training *** If applicable ***			
• Current L6 – 12/05 version......................................	☐		☐
• Part 1 completed by applicant..................................	☐		☐
• Mailed to each clinical clerkship completed...................	☐		☒
• Date(s) mailed (put in additional comments box)............................			

Applicant Last Name:	Applicant First Name:	Date of Birth: MM - DD - YYYY

9.4.4 Revised Application Set-Up Worksheet

NEW APPLICATION SET UP
WORKSHEET

Application Received Date:	ATS Number:
Applicant Last Name:	Applicant First Name:
Applicant Other Last Name:	Applicant Other First Name:
Medical School (check one) ☐ US/CAN ☐ IMG	Qualification Method (Pathway):

			Task Completion Date	Support Staff Initials	For QA Use
1	ATS Update	☐ Qualification method (Pathway) ☐ License class ☐ File location ☐ Received Date ☐ Personal detail screen			
2	Fingerprints	☐ (1) Card included in file ☐ (1) Card sent for processing ☐ Livescan results in file ☐ Fingerprint deficiency letter sent			
3	L1A – L1E Forms	☐ Application Checklist verified ☐ Requested Addendum – Form(s): ☐ Requested new L1E			
4	Application Received Letter	☐ Mailed			
5	AMA Profile	☐ Printed, in file ☐ No match			
6	FSMB – Physician Data Center	☐ Checked ☐ Board Action in File			
7	Original Documents (e.g., Diploma)	☐ Photocopy in file ☐ Returned to applicant			
8	Other Documents in File	☐ L2 ☐ L3A/B ☐ L4 ☐ L5 ☐ L6 ☐ Examination scores ☐ Certified copy of medical degree ☐ Official Letters of Good Standing ☐ Medical school transcript ☐ ECFMG certificate/status letter			
9	'Z' Project' ATS Update	☐ *Application Requirement Status Field* complete			

Original:

Application Worksheet

ATS#_____

APPLICANT'S NAME: _____

_____Rcvd Application with $_____   _____Rcvd Web Payment of $_____

_____Rcvd Web Application

FINGERPRINTS: _____Rcvd FP Cards   _____Rcvd copy of Live Scan Form
_____Rcvd Neither with Application (Checked FP Basket & L/S Folder)

_____Processed One Fingerprint Card   _____Extra Fingerprint Card In File

_____Received Live Scan Clearance   _____Live Scan Clearance Not in Folder

_____Mailed Fingerprint Letter Requesting: _____Live Scan   _____Two FP cards

_____Returned FP cards for completion

_____Requested new L1A-E ("by" line error on Form L1E)

_____Requested Addendum (Form(s) L1_____, Question(s) #_____left blank)

_____Printed AMA Profile   _____AMA No Match

_____Mailed Postcard   _____No Postcard Received

_____FSMB Checked

_____FSMB Board Action In File

_____Returned Original Documents

_____REVIEWED APPLICATION   _____PATHWAY

_____Check/Update Person Detail Screen
_____Log in All Items Received on ATS Notes
_____Fulfill Items on Application Requirement Screen

_____Mailed Status Letter

_____

_____

_____

_____

_____

_____

9.4.5   Revised Licensing Invoice

STATE AND CONSUMER SERVICES AGENCY- *Department of Consumer Affairs*   ARNOLD SCHWARZENEGGER,
Governor

MEDICAL BOARD OF CALIFORNIA
Licensing Program

<Date>

<Applicant Name>
<Applicant Address>
<Applicant City, State, ZIP>

RE: ATS#:

Dear Applicant:

This is to inform you that your Physician's and Surgeon's application for medical licensure in California has been approved. In order to issue the license, payment of the initial licensing fee in the amount of $ 000.00 is required. Please complete the bottom portion of this letter and return to the Board with your payment. Failure to submit the bottom portion will cause a delay in the issuance of your license.

Upon receipt of your initial license fee, your application will be submitted for licensing immediately, unless otherwise requested. The Board licenses at least once a week and licensure documents are mailed approximately two to four weeks thereafter. All license numbers, once issued, are available on our website at http://mbc.ca.gov/loookup.html

If you have any questions please contact the Customer Information Unit at: (800) 633-2322 or in writing at the address noted below.

Sincerely,

Medical Board of California

LICENSING FEE INVOICE

	ATS Number:	<FILL IN>

Name:	<FILL IN>	<FILL IN>	<OPT>
	(Last)	(First)	(MI)

Birth Date:	MM / DD / YYYY	Amount Due:	$ 0.00

ABOVE FEE(S): ☐76T ($783) ☐76V ($391.50) ☐*APP* ($442) ☐FP ($51) *VL3* ($25)

(Please make your certified check, cashier's check, or money order payable to Medical Board of California)
NOTE: PAYMENTS RECEIVED WITHOUT THIS INVOICE MAY DELAY PROCESSING

CASHIERING OFFICE USE ONLY:

Receipt #: _____	Date Received: _____	Amount: _____	Initials:

2005 Evergreen Street, Suite 1200, Sacramento, CA 95815-3831 (916) 263-2382 (800) 633-2322 FAX: (916) 263-2487 www.mbc.ca.gov

Original:

MEDICAL BOARD OF CALIFORNIA
Licensing Program

LICENSING FEE INVOICE

ATS NUMBER

Name:_____, _____ _____
  (Last)   (First)   (MI)

Birth Date: _____   **Amount Due: $**_____

Please make your certified check, cashier's check, or money order payable to
Medical Board of California

Note: PAYMENTS RECEIVED WITHOUT **THIS INVOICE** MAY DELAY PROCESSING
OF YOUR APPLICATION.

LICENSING OFFICE USE ONLY:

US   or   IMG
(Circle One)

ABOVE FEE(S): *76T* ($783) *76V* ($391.50) *APP* ($442) *FP* ($51) *VL3* ($25) **Staff Initials** _____
(Circle the applicable account code)

TRANSFER FEES

Transfer fees
From Account: _____ ATS #: _____ Receipt #: _____ Date Received:_____

Transfer fees
To Account: _____ ATS #:_____ Include payment above?   Yes   or   No
                                                              (Circle One)
Note to cashier staff:
_____
_____
_____

CASHIERING OFFICE USE ONLY:

Receipt #: _____ Date Received: _____ Amount: _____ Initials:_____

2005 Evergreen Street, Suite 1200, Sacramento, CA 95815-3831 (916) 263-2382 (800) 633-2322 FAX: (916) 263-2487 www.mbc.ca.gov

C:\Users\cdye\AppData\Local\Microsoft\Windows\Temporary Internet Files\OLKE3CF\Fee_Invoice_Revised_8-11-09.docx

Page 247

9.4.6   Reformatted Policies and Procedures Manual Sample

	MEDICAL BOARD OF CALIFORNIA PHYSICIANS AND SURGEONS LICENSING PROGRAM POLICY and PROCEDURE MANUAL	*Policy Number*	
		Effective Date	MM/DD/YY
	Subject GENERAL APPLICATION INSTRUCTIONS	*Page*	1 of 6
		Supersedes	07/01/06

I.   PURPOSE

To define policy and procedures of the Licensing Program with respect to processing of an application for Physicians and Surgeons or Postgraduate Training Authorization.

II.   POLICY STATEMENT

A.   Every applicant for a physician's and surgeon's license shall comply with the requirements of Article 4 of the Business and Professional Code, known as the Medical Practices Act.

B.   Each application shall be made upon the L1A – L1E provided by the Licensing Program, and each application form must contain the applicant's signature verifying under penalty of perjury that the information provided by the applicant is true and correct and that any information in supporting documents provided by the applicant is true and correct.[1]

C.   Each application shall include the following:

   1.   A diploma issued by an approved medical school

   2.   An official transcript

   3.   Other information concerning the professional instruction and preliminary education of the applicant, if applicable

   4.   Either fingerprint cards or a copy of a completed Live Scan form.[2]

D.   Every application shall be accompanied by the application fee effective at the time the application is received.[3]

E.   Within 60 working days of receipt of an application pursuant to B&P Code sections 2102, 2103, 2135, or 2151, the Licensing Program shall inform the applicant in writing whether the application for licensure or PTAL is complete and accepted for filing or deficient and what specific information or documentation is required to complete the application.[4]

F.   Within 100 calendar days from the date of filing of a complete application, the Licensing Program shall inform he applicant in writing of the Programs decision regarding the application for licensure.[5]

III.   DEFINITIONS

A.   Not applicable for this section

IV.   *APPLICATION OF POLICY*

---

1 Medical Practices Act § 2081
2 Medical Practices Act § 2082
3 Medical Practices Act § 2083
4 Title 16, Division 13, Chapter 1, Article 5, § 1319.4(a)
5 Title 16, Division 13, Chapter 1, Article 5, § 1319.4(b)

	MEDICAL BOARD OF CALIFORNIA PHYSICIANS AND SURGEONS LICENSING PROGRAM POLICY and PROCEDURE MANUAL	Policy Number	
		Effective Date	MMD/DD/YY
	Subject GENERAL APPLICATION INSTRUCTIONS	Page	2 of 6
		Supersedes	07/01/06

B.   Set up a new application file:

1.   **Application Type** – Determine if the application is for a License, a PTAL, or is an update to an application for License or PTAL.

2   **Application Version** – Confirm the applicant has completed the current application form. Check the lower left corner of the application form.

    a.   If the incorrect version, mail the applicant ATS notice #40 to request that the correct version of the application be completed (Forms L1A – L1E).

3.   **School Code** – Locate Form L1A Box 11 to identify from which medical school the applicant graduated.

    a.   Look up school code on the School Code List (g://licensing;/schoolcode/schoolcodemasterlist.xls) **OR** on your hardcopy list.

    b.   Write the school code in the shaded "School Code" box at the bottom of Form L1A.

    c.   If the medical school is not on the school code list:

        i.   Check with staff person responsible for updating codes to confirm whether the school is an approved or recognized medical school.

        ii.   If approved submit a written request to the responsible staff person to have new school code assigned. Once assigned see Step (b) above.

        iii.   If the school is not approved or recognized by the Board, send the applicant ATS Notice #15 and close the file on ATS. See Chapter 21 for instructions.

4.   **License Pathway** – Determine the applicant's qualification method by checking:

    a.   Whether or not a previous CA license is reported on Form L1A Box 10

    b.   Written examinations noted on Form L1A Box 13

    c.   Whether or not any postgraduate training is noted on Form L1B Box 14

    d.   Whether or not any licenses are noted on Form L1B Box 15

5.   **License Pathway Sticker** – Put the appropriate colored sticker reflecting the applicant's qualification method on the file folder tab.

6.   **Miscellaneous Mail** – Check you miscellaneous mail and merge any items found with the application file. If the applicant has noted an "Other Name' on Form L1A.

	MEDICAL BOARD OF CALIFORNIA PHYSICIANS AND SURGEONS LICENSING PROGRAM POLICY and PROCEDURE MANUAL	*Policy Number*	
		Effective Date	MMD/DD/YY
	Subject GENERAL APPLICATION INSTRUCTIONS	*Page*	3 of 6
		Supersedes	07/01/06

7. **Fingerprints** – Applicant must submit either two (2) fingerprint cards **OR** a Live Scan receipt.

    a.   Fingerprint Cards:

        i.   **Missing cards**: Check miscellaneous fingerprint basket and imminent fingerprint basket. If still not found, mail applicant ATS Notice #40 with two(2) blank fingerprint cards.

        ii.   **Cards Included**: Staple one (1) card to the left hand side of the file. Send the second for processing.

    b.   Live Scan Receipt (California Residents ONLY):

        i.   **Missing receipt**: Check miscellaneous fingerprint folders and imminent fingerprint basket. If still not located, mail applicant ATS Notice #40 with a blank Live Scan Form.

        ii.   **Receipt Included**: Retain in file.

8. Update Applicant Tracking System (ATS)

    a.   See Chapter 21 for ATS instructions

C.   Initial review of application:

    1.   Mandatory order of files:

        a.   ATS notes, address change, Fee invoices

        b.   Application update, latest to earliest:

            i.   Name change documents

            ii.   National Practitioner Data Bank (NPDB) Reports

            iii.   Federation of State Medical Boards (FSMB) Reports

            iv.   Hospital privileges documentation

            v.   Malpractice documents and explanations

            vi.   Background checks, criminal conviction documentation, and explanations

            vii.   Traffic convictions documentation and explanations

        c.   Educational Commission for Foreign Medical Graduates (ECFMG) Certificate Status Report (Form 282B) – **IMG ONLY**

	MEDICAL BOARD OF CALIFORNIA PHYSICIANS AND SURGEONS LICENSING PROGRAM POLICY and PROCEDURE MANUAL	Policy Number	
		Effective Date	MMD/DD/YY
	Subject GENERAL APPLICATION INSTRUCTIONS	Page	4 of 6
		Supersedes	07/01/06

    d.   Examination scores:

        i.   State Board Examinations

        ii.   Licentiate of the Medical Council of Canada (LMCC)

        iii.   Federation Licensing Examination (FLEX)

        iv.   Special Purpose Examination (SPEX)

        v.   National Board of Medical Examiners (NBME)

        vi.   United States Medial License Examination (USMLE)

        vii.   Medial Board of California Oral Examination (earliest to latest)

    e.   Good Faith Effort documentation – **IMG ONLY**

    f.   Dental and Osteopathic curriculums and letters

    g.   Certificate of Medical Education (Form L2) earliest to latest

        i.   Explanations for leaves of absence

        ii.   Extended curriculums

        iii.   Disciplinary actions

        iv.   Probationary actions

    h.   Medical School Transcripts, earliest to latest:

        i.   **IMG ONLY:**

            A.   Certification of translator

            B.   Translation

            C.   Transcript

    i.   Medical School Diploma:

        i.   **IMG ONLY:**

            A.   Diploma

            B.   Certification of translator

            C.   Translation

	MEDICAL BOARD OF CALIFORNIA PHYSICIANS AND SURGEONS LICENSING PROGRAM POLICY and PROCEDURE MANUAL	*Policy Number*	
		Effective Date	MMD/DD/YY
	Subject GENERAL APPLICATION INSTRUCTIONS	*Page*	5 of 6
		Supersedes	07/01/06

      D.   ACTA (required of some Mexico graduates)

      E.   Certification so translator

      F.   Translation

      G.   Social Service (required of Mexico graduates)

      H.   Certification so translator

      I.   Translation

b.   Letter from Fifth Pathway Program – **IMG ONLY**

c.   Original California Wall Certificate, if applicable

      i.   Notarized letter regarding the status of the original certificate (lost, stolen, destroyed), if applicable

d.   Letters of Good Standing

e.   Postgraduate Training Authorization Letter(s), latest to earliest – **IMG ONLY**

f.   Certification of Completion of ACGME/RCPSC Postgraduate Training (Form L3A/B), earliest to latest

      i.   Specialty Board Certifications

      ii.   Explanations and documentation of withdrawals, transfers

      iii.   Description of four (4) months general medicine

      iv.   Documentation and explanations of program discipline

      v.   Documentation and explanations of program failures

g.   Certificate of Current Postgraduate Training Enrollment (Form L4), if applicable

      i.   Documentation of cease and desist training

      ii.   Professional activities

h.   Clinical Worksheet (Form L5) – **IMG ONLY**

      i.   Documentation in other formats of undergraduate clinical clerkships

      ii.   Fifth Pathway breakdowns

	MEDICAL BOARD OF CALIFORNIA PHYSICIANS AND SURGEONS LICENSING PROGRAM POLICY and PROCEDURE MANUAL	Policy Number	
		Effective Date	MMD/DD/YY
	Subject GENERAL APPLICATION INSTRUCTIONS	Page	6 of 6
		Supersedes	07/01/06

iii.   Proposal and confirmation of remedial training

iv.   Internships

v.   Internado (Mexico graduates)

i.   Certificate of Clinical Training (Form L6), earliest to latest – **IMG ONLY**

j.   Returned originals form (earliest to latest)

k.   American Medical Association (AMA) Physician Profile

l.   Staple Fingerprint Clearances and Arrest Reports to left side of file

2.   Forward application file to the appropriate Application Reviewer for processing

VI.   *RESPONSIBILITY*

A.   Supervisors/Managers are responsible for implementing the program in a consistent and equitable manner.

SPONSOR

Chief of Licensing

REVIEW CYCLE

Circular

APPROVAL

_____   _____

Chief of Licensing   Date

Original:

PROCEDURE -

Every applicant must submit an Initial and Update Application for Physician's and Surgeon's License OR Postgraduate Training Authorization Letter (Forms L1A through L1E). The application allows the applicant to Indicate for which of the following he or she is apply:

1. **Licensure** – requesting issuance of a physician's and surgeon's license
2. **Postgraduate Training Authorization Letter (PTAL)** – for international medical school graduates applying for an authorization letter to participate in an ACGME-accredited postgraduate training program within California.
3. **Update** - person has a pending application on file and wants to keep the file open/active.

Listed below are the **minimum required application and supporting materials** for medical licensure for a domestic medical school graduate (US or Canada):

- Application Forms L1A-L1E
- Two fingerprint cards or copy of Live Scan form
- Fees of $493.00 or copy of online payment receipt
- Official examination scores received directly from the reporting agency
- Form L2
- Official medical school transcript
- Certified copy of medical degree
- Official Letters of Good Standing (if applicable)
- Form L3A-L3B
- Form L4 (if applicable)
- License fees

Please follow the below steps to **set up an application file,** and **conduct a preliminary review** to ensure all required documents have been submitted:

Set up a new application file:	
Step:	**Action**
A.	**Type of Application Submitted** - Ensure that the application being reviewed is the application for Initial and Update Application for Physician's and Surgeon's License or Postgraduate Training Authorization Letter. Look at the top of L1A to see which type of application the applicant has submitted (License/PTAL/Update). It is not uncommon for the applicant to mark the wrong box or leave the boxes blank. A new application is not required if either instance occurs.
B.	**Application Revision Date** - Has the applicant completed the current application form provided by the Board? Check the revision date in the lower left corner of the application form. The current accepted version has a revision date of 4/2008 on Form L1A, a revision date of 12/05 on Forms L1B, L1C,and L1D, and a revision date of 11/4/08 on Form L1E.

IF:	THEN:
The applicant used an old version of the Board's application:	Mail the applicant ATS notice # 40 and request a new completed application (Forms L1A-E)

2.2
8/24/2009 - G:\Licensing Program\Policies and Procedures 2008-09\Committee Approved\Processing US_Canadian Application_general instructions_121708.doc

Page 255

Licensing Policies and Procedures Manual
Chapter 2 – Typical processing of U.S./Canadian Application
General Application Instructions

C.	School Code – Review question # 11 to see from which medical school the applicant graduated. Look up the school code on the Excel School Code list (g:/licensing/school code/schoolcodemasterlist.xls) OR on your hard copy list. Write the school code in the shaded "School Code" box at the bottom of Form L1A.	
	IF:	THEN:
	The medical school is not on the school code list	Immediately check with the staff person in charge of updating the codes and confirm the school is an approved or recognized medical school. If it is, submit a written request to the staff person for a new school code to be assigned. Once you have the new code, update the "School Code" field on the L1A. If the school is not approved or recognized by the Board, mail the applicant ATS notice # 15 to advise the applicant that the medical school is not approved/recognized and that the unexpended portion of the applicant's processing fee will be refunded along with any licensing fee submitted. Close the file on ATS – see Chapter 21 for instructions.
D.	**Licensing Pathway** - Determine the applicant's qualification method (pathway to licensure, Chapter 1, Pages 4 and 5) by checking: • The medical school issuing the medical degree on L1A • Written examinations noted on L1A • Whether or not any postgraduate training is noted on L1B • Whether or not any licenses are noted on L1B. • Whether or not a previous CA license is reported on question # 10 on L1A	
E.	**License Pathway Sticker** - Put the appropriate colored sticker reflecting the applicant's qualification method on the file folder tab.	
F.	**Miscellaneous Mail** – Check your miscellaneous mail and merge any items found with the application file. If the applicant has noted an "Other Name" on Form L1A, check the miscellaneous mail folders under this name also.	
G.	**Fingerprints** - Check file for fingerprint card, live scan receipt, or letter mailed to the applicant from support staff, requesting either fingerprint cards or live scan.	
	IF:	THEN:

2.3

8/24/2009 - G:\Licensing Program\Policies and Procedures 2008-09\Committee Approved\Processing US_Canadian Application_general instructions_121708.doc

Page 256

	If none of the required fingerprint documents are located:	Check the miscellaneous fingerprint folders and imminent fingerprint basket. Place clearances found in the miscellaneous folder in your file. Process cards found in the imminent fingerprint basket. See Chapter 11 for instructions on fingerprint processing. If still not found, check with support staff and if necessary request that support staff mail a Live Scan form or fingerprint card to the applicant. Update ATS notes to indicate the date Live Scan or fingerprint cards were mailed to the applicant.
H.	**Update the Applicant Tracking System (ATS)** – (see Chapter 21 for ATS instructions) **Enter the following:** • Qualification method (pathway) • License class (A, C, or G) • File location is US or IMG (until file is reviewed) • For applicants who paid online (web applicants) make sure the received date (Rec Dt in middle of License Application screen on ATS) is the date when both the fees and application were received in the office. Web applicants often pay first then mail the application later – in this instance the received date would be the date the application was received. Use the date of receipt of the last item (application or application processing fee). • Update the person detail screen with the applicant's first, middle (if any), last name, date of birth, social security number, gender, address of record, telephone numbers, and e-mail address (optional).	
I.	File application folder into the designated "pending review" file drawer in your cubicle	

Initial Review of the application (within 60 business days of receipt per CCR 1319.4):

Step:	Action	
J.	Put file into order per the Mandatory Order of Files document (see Chapter 2, page x for instructions)	
K.	Remove all staples from the documents; keep them in the mandatory order.	
L.	Staple the Fingerprint documents to left side of file folder.	
M.	Review application and note needed items.	

Licensing Policies and Procedures Manual
Chapter 2 – Typical processing of U.S./Canadian Application
General Application Instructions

N.	For any missing information, refer to the correct section in this manual relative to the particular question and/or form and applicable deficiency letter.
O.	**Review application for missing information.** All questions must be answered and all supporting documents must have been submitted to the Board unless otherwise noted. If one or more questions on the application have been left blank, the applicant is required to complete a new application (L1A-E). The Board's legal counsel has determined that once an application has been signed and notarized additional information may not be added. As such, a new application is required.

When reviewing the application forms, use the "MBC Use Only" squares in the gray margin, to check off when a question has been answered AND when the supporting documentation has been provided and approved.

Review the L1E to ensure the appropriate photograph has been provided and that the form is signed and notarized correctly.

IF:	THEN:
The applicant left one or more questions blank:	Using the gray "MBC Use Only" section of the application, use a red pen to indicate the areas where the applicant was missing information. Also, photocopy the page containing the missing information/blank answer, and return it to the applicant as evidence of the incomplete application. Mail applicant ATS notice # 40 to request a new completed application (L1A-E)

P.	If the application is determined to be complete, see Chapter ? for instructions on submitting a completed application for licensing.

2.5
8/24/2009 - G:\Licensing Program\Policies and Procedures 2008-09\Committee Approved\Processing US_Canadian Application_general instructions_121708.doc

Page 258

The Mandatory Order of Files for <u>U.S. and Canadian</u> medical school graduates is as follows:

1.	ATS Notes Address Change Fee Invoices
2	Application Update (Initial AND Update Application For Physician's and Surgeon's License OR Postgraduate Training Authorization Letter - Forms L1A-L1E) latest to earliest
3	Initial AND Update Application For Physician's and Surgeon's License OR Postgraduate Training Authorization Letter - Forms L1A-L1E • Name change documents • National Practitioner Data Bank (NPDB) Reports • Federation of State Medical Boards (FSMB) Reports • Hospital privileges documentation • Malpractice documents and explanations • Rap sheets, criminal conviction documentation, and explanations • Traffic convictions documentation and explanations
4	Examination Scores: • State Board Examinations • Licentiate of the Medical Council of Canada (LMCC) • Federation Licensing Examination (FLEX) • Special Purpose Examination (SPEX) • National Board of Medical Examiners (NBME) • United States Medical License Examination (USMLE) • Medical Board of California Oral Examination (earliest to latest)
5	Dental and Osteopathic curriculums and letters
6	Certificate of Medical Education (Form L2; earliest to latest) • Explanations for leaves of absence, extended curriculums, disciplinary, and probationary actions
7	Medical School Transcripts (earliest to latest)
8	Medical School Diploma
9	Original California Wall Certificate – (applicant re-applying for licensure per CA B&P Code section 2428) OR Notarized Letter regarding the status of the original certificate (lost, stolen, destroyed)
10	Letters of Good Standing • State/province/country license discipline documentation and explanations • CAS 610 screen printout for applicants re-applying for licensure per CA B&P Code section 2428

2. 6

11	Certification of Completion of ACGME/RCPSC Postgraduate Training (Form L3A/B; earliest to latest) • Specialty Board Certifications • Explanations and documentation of withdrawals, transfers • Description of four months general medicine • Documentation and explanations of program discipline • Documentation and explanations of program failures
12	Certificate of Current Postgraduate Training Enrollment (Form L4 - eligibility for reduced initial license fee) • Documentation of cease and desist training • Professional Activities
13	Returned Originals form (earliest to latest)
14	American Medical Association (AMA) Physician Profile
15	Fingerprint Clearances and Arrest Reports (RAP sheets) – stapled to the left side of the file until the applicant is ready to be licensed. Once the file is approved for licensure, the Licensing Technician (Cindy Rogalski) will remove and shred the DOJ and FBI fingerprint responses.

9.4.7   MBC Web Site – Revised Applicant Tab

Page 1 Revised

<u>Home</u> →**applicant**

Licensing Process

Attention: Osteopathic Physicians and Surgeons - If you are applying for licensure as an osteopathic physician and surgeon, please contact the **Osteopathic Medical Board of California** at (916) 928-8390 for an application and further information.

Attention: International Medical School Graduates - If you are an International Medical School Graduate seeking the Postgraduate Training Authorization Letter (PTAL) allowing you to apply to a California Postgraduate Training Program <click here>

Attention: If you have already submitted an application and want to check the status of your application online *<click here>* or email info@mbc.ca.gov

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General Information on the Licensing Process

Submit the application, fees and documentation at least six (6) to nine (9) months before licensure is needed - Applicants are strongly encouraged to submit the license application, fees and supporting documentation at least **six to nine months before licensure is needed.** Documentation is required from several different entities in order to complete the application file. Due to the complexity of each application file, MBC cannot identify all variables that may cause additional review and subsequent delays. Therefore, it is not possible to provide assurances that any applicant will be licensed by a specific date.

<u>MBC is a law enforcement agency</u> - <insert narrative from GME outreach materials>

<u>Licensure Requirements</u>

- For graduates of U.S. or Canadian Medical Schools <u>and</u> in Postgraduate Training, Business requires licensure ....

- For graduates of International Medical Schools <u>and</u> in Postgraduate Training <cite statute> requires licensure ....

- For all others <cite statutes> requires licensure

<u>Licensure Application, Forms and Documentation</u> – The Applicant is required to complete the license application, provide fingerprints and other documentation. The applicant is also responsible for requesting additional information from other entities such as Medical School and Postgraduate Training Program(s). Read the application instructions carefully. Unnecessary delays can be avoided if application is completed correctly and accurately. The list of forms and documentation are listed on the next page.

<u>Fees</u> – **The Licensing application fee is $493. The initial licensing fee is $808.** If eligible for reduced initial licensing fee, the amount is $416.50. See application for Application Instructions and Fee Schedule for more information. **Do not send cash**

- Make your cashier's check. personal check or money order payable to the Medical Board of California
- Mail your application and fee to:
  Medical Board of California
  2005 Evergreen Street, Suite 1200
  Sacramento, CA 95815

Page 2 – Revised

Home →»applicant →»additional info

Licensing Process

Application Process

The application process cannot begin without payment of application fee and receipt of the application. Once the application and fees have been received, applications are reviewed in the order received. Pursuant to §1319.4, MBC staff must complete the initial review within 60 *working days*. After the initial review is complete, the applicant is notified in writing of the application status and given an itemized list of documents needed to complete the file. These subsequent documents also will be reviewed in order of receipt. Once all documentation is received, reviewed and accepted, MBC has 100 calendar days to determine its licensure decision.

Application, Forms and Payment

- Application Instructions and Checklist *<click here>*

- Fingerprinting for California residents: Livescan Form and Livescan locations

- Fingerprinting for non-California residents: <insert requirements or link>

- Online Licensing Application Payment *<click here>*

- U.S./Canadian Medical School Graduate Application, and Fee Schedule (fill-in) - *<click here>*

- International Medical School Graduate Application and Fee Schedule (fill-in) - *<click here>*

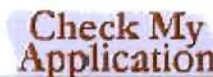### Additional Information related to the Application, Forms and Payment

- NEW MANDATORY FEE EFFECTIVE JANUARY 1, 2009 <can this line be removed?>

- Examination Scores

- Federation Credentials Verification Service Application

- Convictions - How it Might Affect a License / PTAL Application

Need additional info? <link to send an email to info@mbc.ca.gov> or call CIU 1-800-633-2322

Page 1 - Original

Licensing Application Information

Please click here to view the status of your licensing application:

Check My Application

The Medical Board's Licensing Section protects the consumer through the proper licensing of physicians and surgeons. The comprehensive review of an application provides that licensees have the requisite qualifications and educational credentials for medical practice.

California's licensing requirements remain among the more stringent in the nation; nevertheless, an ever-increasing number of applicants seek licensure in California. During the 2008-2009 fiscal year, over 6,000 applications were received by the Board and over 4,600 licenses were granted. Applicants should recognize that the application review process can be lengthy, and are encouraged to start the application process at least **six to nine months** before they need licensure. While the sense of urgency experienced by each applicant is understood, the licensing staff is responsible for reviewing many files, and cannot complete the review of a file if required documents are missing. Oftentimes, the missing documents must be obtained from distant medical schools or programs, resulting in more delays. It is imperative for applicants to understand that the review process is guided by the requirements set forth in State law, which does not provide for any waivers to be granted by staff or by the Board.

- The Board is only accepting applications with the following revision dates: 12/05 and 04/08.

- Applications are reviewed in the order of receipt.

- Applicants should submit all required documentation as soon as possible; however, without both the application and fees, staff cannot begin the initial review process.

- Fingerprint cards should be submitted early in the process, preferably with the application and fees, because this security clearance is lengthy.

- Do *not* wait to submit an application until all documentation is complete, because that will significantly delay the fingerprint card processing.

Once an application has been received, staff must complete the initial review within 60 working days, although this often occurs in less time. The applicant is then notified in writing of the application status and given an itemized list of documents needed to complete the file. These subsequent documents also will be reviewed in order of receipt.

The review of applications filed by US/Canadian medical graduates is fairly routine. When delays occur, they generally result from the required FBI fingerprint clearance, which may take a few months.

While the review of applications filed by international graduates is more complex, delays usually are the result of education and training which does not meet the standard required in law and which therefore must be

remediated. Other extensive delays occur as applicants try to obtain documents from foreign institutions or when certified translations are needed.

Lastly, when all documents have been submitted and an application is complete, regulations allow an additional 100 days for processing. This time frame may include a senior management review of complex files and a request for clarification of some documented information.

The Board cannot predict the variables that may cause delays as each application is reviewed. Therefore, it is not possible to provide assurances that any applicant will be licensed by a specific date.

Continue

Page 2 – Original

Licensing Process

Online Licensing Application Payment

NEW MANDATORY FEE EFFECTIVE JANUARY 1, 2009

- U.S./Canadian Medical School Graduate Application - *Fill-In*

- International Medical School Graduate Application - *Fill-In*

- California ACGME Approved Postgraduate Training Program: Postgraduate Training Registration Form

- Live Scan Form

- Live Scan Locations

- Examination Scores

- Federation Credentials Verification Service Application

- Convictions - How it Might Affect a License / PTAL Application

Attention: Osteopathic Physicians and Surgeons

Do not complete this application packet if you are applying for licensure as an osteopathic physician and surgeon. Please contact the Osteopathic Medical Board of California at (916) 928-8390 for an application and further information.